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ABSTRACT

County school administrators and supervisors, school counselors, school psychologists, teachers, Parent Teacher Association members, clergymen (both Protestant and Catholic), a consulting psychiatrist, and members of the County Medical Society of Lewis County, New York all worked together (November 1959-June 1963) "to organize the resources of a rural county to create a climate in which mental health grows." A resource library of some 150 professional books and many pamphlets on mental health was established, and numerous meetings, workshops, conferences, and lectures (both formal and informal) went into the planning and strategy of this group oriented effort. Two experts were employed to design the research of several programs (such as the 3-year Child Study Program, designed to evaluate student and teacher attitudes) and to tabulate resulting data, while other experiences were evaluated subjectively. Tentative rationale for developing a community mental health program was effected by the Consulting Psychiatrist. Conceived as a workable "blue print" for rural communities concerned with developing mental health programs based on the Lewis County experience, this report emphasizes total community involvement and the importance of working in groups. "Difficulties encountered" included semantic problems, professional semantics vs. nonprofessional; bungling of the research aspect, since project and research were not conceived as a unit; and an attempt to handle more territory than was possible, given the time limit of the project. (JC)

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A REPORT BY
• GLYN MORRIS, Ed.D.
• ERNEST GOSLINE, M.D.

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MOBILIZING A RURAL COMMUNITY FOR MENTAL HEALTH

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FOREWORD

by

HOWARD G. SACKETT

Why should certain children living in rural and relatively sparsely settled areas be denied the help they may need to make them happy and successful members of society? This question kept haunting some of us in Lewis County, as it does in every rural region, who have responsibility for the education of the children in the public schools.

The story that follows tells what one rural county tried to do to find an answer—an answer which may make it possible to eliminate one more minus and substitute a plus which may be added to the many pluses of rural living.

If it were not for Glyn Morris, who has written the final report, this story could not be told. His professional career has been spent in rural areas of the country, and each place has been enriched by his insight into the needs of rural youth, and the creative ways which he has found for meeting them.

This Project could have one of the most far-reaching effects for good of any with which he has been associated. Here will be found a "blue print," based upon an active program to organize the resources of a rural county, to create a climate in which mental health may grow. The "blue print" outlines a course of action which does not require large sums of money—just a commitment to help children, and a reasonable amount of intelligent effort.

While it is true that Glyn Morris gave the leadership as Coordinator of the Project, it is also true that the key to what success we may have had, has been due to the cooperation, team work and effort of many people. There have been so many people involved in this Project, I hesitate to mention some for fear of leaving out those

who have contributed, but who must remain unnamed. However, I must cast aside my fears and give thanks to those who have been especially responsible for help, encouragement, and advice.

Many thanks to the New York State Department of Mental Hygiene for the interest and financial help to make the Project possible, and especially to Miss Irene Tobias, Community Mental Health Representative, who worked so closely with us and helped guide us through shoals and over rough roads. My thanks to a grand group of chief school administrators who had such fine insights into the problem, and made it possible to carry on in their schools and school districts by opening the necessary doors, as well as giving their time and outstanding educational leadership; to the building principals and supervisors for their understanding and help; to the classroom teachers for their willingness and eagerness to take on another burden in the hope they could help make the burden of others easier by their participation. I especially thank Paul Sohovic, Psychologist, and William Alexander, Elementary Supervisor (for most of the period) on the staff of the Board of Cooperative Educational Services, for the many hours of extra work, and excellent advice; Dr. Ernest Gosline, Consulting Psychiatrist, for his tremendous personal interest and outstanding professional assistance; the school counselors and nurse-teachers; the Lewis County Health Association; and the Parent Teacher Associations for their valuable help. We are grateful to Doctors W. J. Dipboye and William F. Anderson, Jr., of Syracuse University, for their counsel and work on the research design.

Finally, I am grateful to John Caezza, Administrative Intern from Syracuse University, under the Inter-University Program, Project II, supported by the Ford Foundation, for his reading of the final manuscript; the Institute for Child Study at the University of Maryland,

and special thanks and appreciation to members of the Office Staff, Mrs. Leola Gaylord, who has typed and re-typed the many drafts of the manuscript as well as records of Project reports, and to Mrs. Edna Sessions, my Secretary and right hand, for accepting the many distractions and disruptions caused by the Project.

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CHAPTER I

What the Reader May Expect

The story of how citizens of a rural county succeeded in developing a community mental health program by way of a pilot project would not seem to promise anything enchanting to a reader. But, after nearly four years of effort, when the community leaders met in conference to plan next steps, a speaker emphatically stated—"This is a story that *should* be told."

Some details of the four year Project were described to a professional group outside Lewis County. The narrator, a participant in one of the Project group experiences, alleged (perhaps extremely) that the audience "almost fell out of their chairs!"

From the faltering beginning to the end of the first phase, as more people became involved, interest increased. Eventually, what had been accomplished, and what could yet be done, developed enthusiasm of high amperage. New and important data had been compiled on some aspects of mental health. By way of adding some icing to the above, the yearly budget was less than $12,000. Because this was a pilot program the budget included considerable expense for research and equipment necessary to the research.

Lewis County now has a feasible community plan for improving mental health, soundly based on features which can be duplicated in some form or other in many rural communities. In principle, one might even conclude that what was learned in Lewis County might apply to any community.

Later in this narrative, after describing how and why the program was started, achievements as well as problems will be described in detail. In brief, the following occurred from November 1959 to June 1963:

1. All county school administrators, supervisors, and other key personnel held two week end conferences on mental health.
2. The above group, together with counselors of the nine county district schools, devoted five consecutive afternoons and evenings to Child Study, under the leadership of Dr. Daniel A. Prescott.
3. The administrators and supervisors held twenty-four all-afternoon sessions to study and discuss topics related to improving human relations within the school.
4. About one third of the 350 teachers volunteered to participate in a three-year program of Child Study. This included three two-week summer workshops and nine lectures by specialists.
5. Seven central schools held a coordinated series of five PTA meetings (total of thirty-five meetings) on some aspect of mental health.
6. The counselors, psychologists, and a school nurse met thirty-six times with the Consulting Psychiatrist for intensive study of human behavior.
7. A majority of the clergy, both Protestant and Catholic, met regularly with the Consulting Psychiatrist for discussion and lectures.
8. Two day-long county-wide conferences on mental health were held at the county-seat.
9. The Consulting Psychiatrist met five times with available members of the county Medical Society. The Society also sponsored a meeting of unusual interest attended by over seventy professional persons residing in Lewis County.
10. A resource library of approximately 150 professional books and many pamphlets, on mental health, counseling, and related topics was established and made easily available to teachers, clergymen, and others.

11. The District Superintendent of Schools, his staff, and other key personnel held innumerable formal and informal conferences, primarily on planning and strategy.
12. The Consulting Psychiatrist had many informal consultations with individuals, suggesting how to proceed in their own work with individuals; and, on a number of occasions, gave professional assistance where it was otherwise impossible or difficult to obtain.
13. Several discrete programs of the Project were researched, and other experiences evaluated subjectively. Two experts were employed to design the research and tabulate such data as could be obtained.
14. The Consulting Psychiatrist through his experience and observations effected a tentative rationale for developing a community mental health program. He also discovered problems and obstacles inherent in a relatively new concept for improving mental health.
15. Two community agencies will provide funds to enable the program as established, to continue and to expand.

The program was not all peaches and cream; and part of the value of the Project lies in reporting difficulties encountered.

The closing conference, briefly described later in this report was limited to members of groups who had worked closely with the Consulting Psychiatrist, together with representatives of other county organizations essential to a community mental health program. A notable feature of this conclave was the spectrum of viewpoints represented, both lay and professional, which included clergymen of widely different orientation. This shows that cou-

cern for the well-being of children somehow transcends discrete metaphysical and theological concerns. Even as this report is being compiled, a series of a dozen meetings for clergymen has been arranged and are in progress; and the counselors are in weekly session with the Psychiatrist.

The prospects are good that as time goes on, other groups and organizations will be included in the community mental health program described in the following pages. This prediction is based on the enthusiasm of those now involved. Furthermore, a statement by a knowledgable person also seems to indicate future trends for the Lewis County Mental Health program. This person was not involved in the Project, but had indirectly picked up the essence of a group experience, and stated to a member of the group, "I'd give an awful lot to have had your experience!" She will have an opportunity! And to insure this; she did much to help secure funds for continuing the Lewis County program.

CHAPTER II

The Setting

Lewis County, covering an area of 1,270 square miles, is east of Lake Ontario and includes some of the foothills of the Adirondack Mountains. Much of the area is cutover timber land. The Black River, running north and south, divides the county roughly in the middle. About twenty-four percent of the annual income of county residents comes from agriculture, supporting thirty-one percent of the working population. Approximately twenty-five percent of the population is employed in manufacturing, primarily of wood and paper products and related industries. The remainder of the population is engaged in trades and services, government and other occupations. The population in 1960 was 23,249, a figure which has remained almost constant for half a century, but 728 higher than in 1950. Much of the land on the western plateau, with an altitude of 2,000 feet, was formerly used for agriculture but is now being reforested. Abandonment of this area partly accounts for the stable population. The county has the greatest annual snowfall of any region east of the Rockies, making it a popular winter sport area. There is abundant water power available. Lowville, the county seat, is the largest village, having a population of 3,800.

With this setting in mind, certain difficulties must obviously be considered in developing this particular community mental health program. The most apparent ones are physical, i.e., the severe winter climate and the distance between schools, so that during winter, the weather—a combination of continuing snow-fall (median per year 144 inches) and cold, on occasion as low as 50° below zero—produces chronic uncertainty as regards meeting schedules, particularly night meetings. During

winter, the wind can make a road disappear in clouds of swirling snow, and produce terror in a motorist, and subsequently reticence about driving a car at night.

There are seven "centralized" school districts. The central schools range in size from 540 to 1900 pupils. Two of the schools are sixty-six miles apart. All schools participate in the services made available through the Board of Cooperative Educational Services, of which the District Superintendent is the Executive Officer. This Board makes it possible for a school district to contract for services such as health service, art education, physical education, dental hygiene, driver education, music, elementary supervision, guidance, speech therapy, audio-visual services, and special classes for retarded children, which are not possible for an individual district to support.

Teacher turnover varies from year to year; in the school year 1963-64 it was approximately twenty percent. This should be kept in mind, even though the total population figure remains stable. The chronic errosion of human resources which characterizes rural communities also persists to some extent in Lewis County.

But, to place this situation in perspective, it must be emphasized that within the county are constructive forces, both in nature and in the people, which are reflected in this narrative.

CHAPTER III

The Project's Roots

The Lewis County Project did not pop into being. It would be difficult, if not impossible, to delineate the inherent and indigenous factors which ultimately must be considered in a description of this community effort—complex as this is. Suffice it to say that fortunately for Lewis County, several of its former district superintendents had transcended the limitations of geography and climate, and had viewed the public school program in large terms.

The present District Superintendent, Howard G. Sackett, became superintendent of the entire county as a result of the New York State Education Department's policy of combining districts upon the retirement of former superintendents. This policy was based on changes in methods of travel and communication; hence the amalgamation of school districts.

By a fortunate combination of circumstances Howard Sackett had experienced the consolidation of the four original districts. Sensitive to the insights of former superintendents, he proceeded to build on the solid foundations inherent in the community.

When the present District Superintendent took office he was aware that a study of rural community improvement programs revealed that results were notably effected by the attitude of the local school administrator toward the program. For example, a successful effort to improve community health services in Michigan depended on individual local administrative support of goals and procedures. In this narrative the reader will find evidence to support the Michigan study, conducted by the Kellogg Foundation.

With the above in mind, Superintendent Sackett, be-

ginning in 1951, met with all the district principals for an entire afternoon, every other week; each time at a different school. He has continued this practice ever since.

The meetings began with luncheon served by the homemaking class. The agenda included a minimum of routine administrative and housekeeping matters. Most of the time was devoted to such topics as "How to Meet Pupil Needs"; "How to Improve the Reading Program"; "How to Select and Use Standardized Tests." When someone raised such a question as "How do you fellows select cheer-leaders?" the problem was examined for its educational implication, so that the principals eventually learned that the Superintendent's meetings were not going to be devoted to exchanging "tricks" of the trade except where these were appropriate.

The District Superintendent was not required to hold these meetings. By doing so, he established a climate which nurtured communication and the gradual extension of a viewpoint which led to the community mental health project initiated in November 1959.

Several administrators concurrently began holding faculty meetings every other week. The focus at these meetings was more or less on the topics considered at the Superintendent's meetings. At the faculty meetings, however, the teachers often wanted to discuss problems of individual pupils within their particular schools. At first the discussions were informal, and, more often than not, revealed gaps in information about pupils, which should be found in the individual pupil record folders. This led to consideration of the need to improve the quality of the school's cumulative records so that these could be more effectively used in guidance.

The Superintendent, by providing leadership through in-service training of the district principals, set the pace for their leadership. Gradually, the principals confi-

dently ventured into new or neglected areas of in-service training.

Due to the tone and regularity of the Superintendent's meetings, district principals were able to deal more frankly with basic problems in their respective schools. A recent letter from a former principal stated, "F.B. and I get together often. We still talk about the administrator's organization of Lewis County. We miss this sort of group interaction. *It is so important to effective administration.*" (Italics mine)

Contrary to what is commonly assumed, teachers generally do not object to giving time for in-service training if the meetings are devoted to well planned programs which help them better understand the pupils. Consequently, the teachers gain more professional competence and personal satisfaction.

To fill in the picture, it is necessary to point out that during the years prior to the time when the request for the Project plan was presented to the New York State Department of Mental Hygiene at Albany, several other events and circumstances were influencing the District Superintendent and others to take the position which resulted in the Project.

In the first place, personnel of the New York State Traveling Child Guidance Clinic, which came to Lewis County once each week during the fall and spring, often had time on their hands. Although the clinic staff consisted of an excellent and well-trained psychiatrist, a clinical psychologist, and a psychiatric social worker, they frequently were not pressed with cases.* Some persons thought this situation stemmed from the transitory nature of the clinic, and that this condition would be remedied by establishing a permanent, locally financed clinic. On the other hand, many who were favorably disposed to the

* This condition does not prevail at this writing.

clinic had concluded that the community was not yet ready for such a clinic. Considerable education of parents and teachers would be necessary before this goal could be reached. It should be noted too, that the Mental Health Committee of the Lewis County Health Association had given much thought to organizing a permanent mental health clinic in Lewis County. After sounding out some of the officials within the county, however, the Committee had more or less concluded that a permanent mental health clinic was out of the question. Even if funds were available, a realistic look at the matter would lead to the conclusion that staffing such a clinic would be practically impossible. Furthermore, there was a growing conviction that a clinic, even a full-time clinic, was only one facet of a community mental health program.

Second, as individual school faculties met to consider the problems of certain students in their schools, the administrators, counselors and teachers increasingly sensed that when a child had a special learning problem, as, for example, in reading or arithmetic, this problem frequently had its origin in some emotional disturbance or was accompanied by an emotional problem. The point of view then evolving among Lewis County educators is well expressed by the authors of *"Anxiety in Elementary School Children."* They are convinced "...that the vast mental health problem in our society should be attacked by focusing on the relatively young child in a situation in which all children must participate, namely, the school." [13]

Furthermore, Withall states, "Evidence is accumulating that the socio-psychological forces generated in the classrooms have greater impact on the learners academically and psychologically than any pedagogical devices or strategems. Hence it follows that careful study and assessment of these forces is essential, and current research is guided by this fact." [15]

Because of the conditions mentioned above, it became clear that the only possible way to develop a community mental health program in Lewis County should take the following into account:

1. The educational system was the logical starting point, a fact increasingly underlined by the positive attitudes and interests of the administrators and many of the teachers.
2. The community must be gradually involved.
3. There were many untapped human resources which could be harnessed to enhance mental health.
4. A program of mental health education was essential for any progress toward securing adequate and permanent mental health services.

And so, after numerous conferences, the District Superintendent decided to do something about the situation, and a plan was drawn up to be submitted to the New York State Department of Mental Hygiene.

By way of hindsight, it is interesting to note that as early as 1957, the Lewis Countians were seeking to establish a community mental health program by beginning in the school. They did not realize however, that mental health education and related research on this was of concern to others. For example, Osborne states "It may seem pretentious to suggest that the mental health emphasis can and should be the generic base of the education enterprise from the primary grades through the graduate school and extramural adult education. But even for the pure scientist, knowledge and understanding of himself as a person, his personal and professional goals and objectives, is essential. In considerable measure his effectiveness will be determined by the kind of self-concept he develops and his ability to relate to those others with whom he must interact in the home, community, and on the job." [8] In the introduction to the same report we read

the following: "There is a great deal of material and a great variety of devices available for the education of the general public in the principles of mental health and mental illness. What is needed now is an evaluation of these materials and of the methods which a citizens' organization can employ in applying these materials effectively."[9]

It should be noted in passing that at the conclusion of the Lewis County Project, it seemed that there had been modest effort to "educate," and to evaluate a community mental health program. There was limited but thought-provoking data resulting from the research. There also was the conviction that professional and lay persons are eager to support a mental health program. A technical definition of mental health was not available to them. Perhaps, however, Lewis Countians surmised the meaning of mental health. At least they were aware that some people are in trouble, and that their troubles, somehow or other prevent them from effectively using their potentials. Parents, teachers, clergymen, physicians and nurses, managers of industry, local town policemen, more or less recognized behavioral disorder or malfunction that could not be attributed to any apparent specific physical cause.

Subsequently, a preliminary proposal was drawn up in 1957 and discussed with representatives of the State Department of Mental Hygiene. Although the funds were not available at that time, the State Department of Mental Hygiene looked with favor on the Project. Eventually, funds were available. After some minor modifications the Project was accepted by the Department on November 15, 1959, with one condition, viz, that a consulting phychiatrist be engaged. His specific duties, however, were not spelled out.

At first this condition seemed impossible to meet since no psychiatrist was available nearby. Fortunately however, Dr. Ernest Gosline had recently moved into Utica

to take charge of the Oneida County Mental Health Program, and, it turned out that he was deeply interested in the Project goals. He was especially interested in the community "do-it-yourself" aspect.

Later in this narrative the strategic and important pioneer relationship between a psychiatrist of another county and citizens of Lewis County will be discussed. One major result of this program is what was learned about how a psychiatrist, busily engaged in his own duties in a city, could effectively use his skills, limited time and professional experience, working with a limited number of leaders and groups in a rural county forty miles away.

In substance, the purpose of the Project as outlined was achieved, although modifications had to be made along the way, particularly on the evalution of the Project; but more on this later.

CHAPTER IV

The Administrators Get on Target

This Project is based on the idea that there is "a strong community of interest between the schools and the mental health of the entire community."* The position taken throughout the Project is that mental health is an on-going and fluctating product of, among other things, the day by day interaction of an individual with significant people in his environment: in the home, the church, the school, and the community.

Teachers in Lewis County had a major role in this Project. A major assumption of the Project was that teachers are a reservoir of professional knowledge about human behavior. It is doubtful, however, that the results they achieved could have been possible without the administrators being favorably disposed to the Project. Their role and experiences, shortly will be described. As individual classroom teachers depend upon the leadership of their particular school administrator, so do the individual administrators depend upon, and are affected by, the leadership of the district superintendent. All the more so in New York State, because the relationship between the district superintendent, and the administrators of the respective districts within his area, has some unique characteristics. In New York State the district superintendent is the representative of the State Commissioner of Education. His legally prescribed duties and powers are almost entirely fiscal and administrative in nature. It is his duty to call teacners together—the frequency not determined by law—except that a maximum of five days

* Taken from the speech made by Marvin E. Perkins, M.D., Commissioner of Mental Health Services, and Director of Community Mental Health Services, New York City, at the closing conference of the Project, May 29, 1963.

per year is set for meetings with all teachers for conferences on educational matters. But the *quality* of these meetings is not, and could not, be prescribed. He may or he may not go beyond the legal prescription of his function, depending upon his own inclination. That is to say, he may, if he wishes, serve as a leader in developing curriculum, and improving instruction, all of which involves providing a variety of learning experiences for his colleagues within the district. In this nebulous area, the sky is the limit, depending upon circumstances and the leadership quality of the superintendent.[6]

A narrative of this Project would be incomplete without a brief description of the point of view of Superintendent Howard Sackett. His actions indicate that he thinks administrating public schools goes far beyond housekeeping and budget making. He believes that quality education should be made available to all boys and girls. He is constantly in touch with the public, through his numerous meetings with boards of education and other lay groups. His experience in this respect has taught him to bend with the wind, and to concede one battle in order to win the war. His characteristic method of working in a group is highly flavored by his belief that concensus must be reached before making a change—or starting a new program. He willingly delegates responsibility to his staff. Most important of all, he practices a major mental health principle; he is able to listen patiently, and with a minimum of interruption, to anyone who seeks his counsel. Although encumbered with many responsibilities, his whole demeanor is one of leisurely approach to any problem or complex situation. He never forgets that he is working with human beings.

He sees the education of boys and girls as a process involving not only their minds but their emotions; and that these are interwoven and never out of context—sometimes favorable to the growth of the child as a person;

sometimes not so. He knows that children have "needs" and that their "needs" pattern, and rate of growth are variables which should always be taken into account in teaching boys and girls. He enthusiastically supports any group of teachers who voluntarily give time to the study of children, more of which we shall describe in a later chapter.

Briefly stated, then, this Project began with the District Superintendent's leadership and vision; following which the principals and their administrative personnel were brought in, including supervisors, the School Phychologist, and counselors; then the classroom teachers. When the schools had become firmly involved, segments of the community were included as it became possible to do so.

As soon as the Project had been approved by the New York State Department of Mental Hygiene, the District Superintendent and the Assistant Superintendent met with the principals of the nine Lewis County districts, three elementary school supervisors, and the School Psychologist employed by the Board of Cooperative Educational Services. The meeting was held at Cazenovia, New York, in November, 1959. It was held away from home base in order to be free of interruption, and thereby to focus on the task.

Essentially, the purpose of this meeting was to discuss the Project, to clarify its goals and purpose, and to reach agreement on next steps. It was made clear that the special knowledge and talent of Paul Sohovic, the only School Psychologist in Lewis County at that time, would be especially needed. Mr. Sackett emphasized at the outset that no school need participate in the Project if the principal and his board of education were not inclined to do so.

As anticipated, not everyone in the group saw the Project in the same terms and from the same view point.

Also it was expected that there would be a few incomplete count downs before the Project got into orbit. Since all that was available to the group was a copy of the Project design which had been approved by the State Department of Mental Hygiene, it was natural that each person present was groping to discover and understand his role in the developing Project, as well as what would be expected of the members of his staff. At that point, for the most part, the term "mental health" meant everything and nothing; so the focus was on the question, "Who does what?" and "Where do we begin?" It was more or less taken for granted that the administrators would continue their regular meeting with the District Superintendent; but now it appeared that these meetings would have a somewhat different flavor than heretofore.

In order to organize the administrative problems into the over-all Project plan, all possible problems, even remotely related, were listed and discussed, but with the understanding of course, that no action could be taken on these problems at that time. A record of that meeting shows a wide range of problems and topics, from the frustrations of an administrator caused by a school custodian, to the relationship between the reading difficulties of children and the subsequent anxiety of their parents. The spectrum of problems, to mention just a few, included:

1. How can we get parents to understand something about child growth and development?
2. Is it possible to decrease the pressures put on teachers by the public?
3. How can we avoid the stigma of having a school psychologist work with a pupil?
4. What can be done to discover potential mental illness in quiet and well behaved children?
5. Why is it so difficult to change an individual's pattern of behavior?
6. What can be done about the strain on pupils resulting from repeated standardized testing?

7. How can the curriculum be made more sensitive to what is already known about how children learn? etc., etc.

Even at that time, the administrators were looking over their shoulders at the idea that they might profitably examine administrative processes in the light of their effect on the mental health of teachers and pupils. As the discussion went on, one of the group pointed out for no apparent reason, that the word "understanding" was used frequently in the discussion. He anticipated what was later reinforced through the Project, namely, that "understanding" is basic to mental health.

In the background of each administrator's mind also was apprehension about securing school board approval to participate in the Project. Not clear at the time, however, was the realization that the reason for any apprehension was simply because the administrators apparently did not have a clear and detailed understanding of what the Project was all about.

Eventually, before the group could adjourn, it was necessary to give the Project a title. Selecting a name for a tangible thing, such as a new-born babe, is sometimes difficult enough; the selection of a title for a project, not quite clearly defined to those who were to carry on was somewhat sticky. The major reason for this soon became apparent: "mental health," even out of context, sets up resistance. Some of the group did not want to include the term mental health in the title, and, perhaps wisely so at that point. Some of them anticipated the possible negative reactions of members of their respective boards of education. Eventually, the Project was christened with the umbrella-like title, Lewis County Cooperative Youth Project. It was agreed that at least one more meeting would be needed to discuss how best to present the Project to a board of education. As an aside, several of the group expressed some sensitivity about the research aspect of

the Project. This was a perfectly normal concern, considering that at that point it was not clear who was to be evaluated or how.

Before adjournment, the possibility of having a program of Child Study such as the one developed by the Institute For Child Study at the University of Maryland was considered. Pending approval of boards of education, it was agreed that this program should be made available for those teachers in Lewis County who wished to participate.

The matter of securing board approval was fairly well cleared up at the next meeting of the administrators. This was a crucial hurdle, and it was necessary thoroughly to discuss it; it seemed highly unlikely that any school board member could take exception to its obvious potential value to the youth and adults of Lewis County.

The principals continued their regular bi-monthly meetings; the focus now, however, was on topics and areas which were more or less directly related to the Project goals. Meanwhile two other intensive in-service conferences were held by the administrators; one involving their participation in Child Study which will be described later; the other, a week end conference held approximately a year after the one which has just been described.

In October, 1960, the group met at Colgate Inn, Hamilton, New York, with Dr. Ernest Gosline, the Consulting Psychiatrist. The agenda for the week end meeting at Hamilton consisted of "The Meaning of Aggression," and "The Meaning of Discipline."* Now the group was more capable than ever before of looking intensively at profound psychological problems.

The first topic took up most of an afternoon and evening. Dr. Gosline defined the meaning of "aggression," as well as placing this mechanism in the context of a par-

* The transcribed record of this conference runs to 129 typed pages.

ticular psychiatric framework. The discussion included a detailed explanation of the dynamics of aggression and the many forms aggression may take. Implications were spelled out, particularly regarding aggression in the school setting, both as a positive and as a destructive force in human behavior. After such an experience as this one, it seems difficult to believe that anyone who deals with people should not have some understanding of what "aggression" means.

At the Colgate meeting a modest experiment was carried on. Before the lecture and discussion on aggression the first half of a film entitled "Discipline in the Classroom" was shown. The film shows two ways of handling what teachers call "discipline" (also known as control). The first half shows a classroom in which the teacher himself is out of control, and, because of his poor judgment and his inability to understand his own insecurity, subsequently loses control of the pupils in his classroom. (Later in this narrative we shall discuss "discipline" in more detail because of its importance to classroom teachers). At this point the film was stopped—that is before the second sequence—and each member of the group was asked to write a brief, unsigned, essay on what he saw. The next morning, i.e., following Dr. Gosline's detailed lecture and the ensuing discussion, the second half of the film was viewed. This showed how another teacher, who possessed understanding of human nature and a modest sense of humor, would handle the situation in the same classroom. Following this viewing of the film—and, without prior notification, each member of the group was then asked to write another essay, i.e., to react to what they saw in the second part of the film. Later, a count was made of arbitrarily selected psychological terms found in the two essays. No names were attached to the essays, they were merely identified by number. Below is what was found as a result of Dr. Gosline's lecture and the ensuing discus-

sion. Column 1 shows the number of words and phrases found in the first group of essays. Column 2 shows the number and variety of words and phrases found in the second group of essays:

COLUMN 1

These words and phrases were found in essay No. 1.

Anxieties	1
Emotionally	1
Emotional unstable	1
Hostilities	1
Insecure	1
Problems	1

COLUMN 2

These words and phrases were found in essay No. 2.

Acting out compulsions and aggression	1
Aggression	9
Aggressive	11
Anxiety	1
Anxieties	2
Attention getting	1
Defense	2
Defense Mechanism	4
Ego	2
Emotionally unstable	1
Feelings	1
Feeling of personal guilt	1
Frustrations	5
Hit out against	1
Hostility	1
Insecurities	1
Mechanisms	1
Motivation	1
Needs	1
Projects	1
Reaction to	1

Reference to cause of behavior	1
Striking out	1
Tension	1
The teacher's personal problems	8
Why people do things they do	1

For whatever it is worth, it seems obvious that the behavior of the teachers in the film on discipline had taken on meaning for the group in terms of psychological concepts. For the time being at least, the audience was thinking in a somewhat different dimension than before. It may not be out of order to assume that education, whether of children or adults, may be more fruitful if the experience is sustained and the topic is in focus. Perhaps the fragmentation of a child's daily school experience has some bearing on mental health.

The week end seminar closed following the description of a "discipline clinic" by a principal from a neighboring high school.

For most of the two years, the topics of the bi-monthly meetings of the District Superintendent, principals, and supervisors were geared to the Project. To be sure, there were occasional lapses: at times it was difficult for some to push next year's budget figures out of mind; or the problem of where to find new teachers. And there was an occasional human yen on the part of some to find a simple formula for dealing with complex administrative dilemmas.

At the risk of over-simplification, the substance of these meetings revolved around: 1) the meaning of "frustration," 2) the meaning of "self-concept," 3) the meaning of "perception," 4) the meaning of "threat," and 5) problems in communication. There were occasional short lectures necessary to describe a theoretical frame of reference and an occasional viewing of films,* and, whenever possible, situations were role-played. The agenda for one

* A list of films will be found in the appendix.

meeting seemed to flow quite easily, either directly or by implication, from the previous meeting. There was ample flexibility so that the agenda often grew out of problems brought to the meetings by the principals themselves.

When one principal reported that his teachers had recently devoted several faculty meetings to considering their own frustrations, he declared that his teachers' meetings on this topic proved helpful to him as well as to his faculty.

The administrators then wanted to discuss their own frustrations and needs. This topic continued to be on the agenda for several sessions. In summarizing their frustrations, the following points were made:

1. The principal is caught in the crossfire of teachers, parents, pupils, board members, as well as vague and often unfounded rumors which develop in any community.
2. He is more or less under constant threat.
3. He has the need always to be right.
4. Pupils, teachers and the public have an image of him which includes measures of high expectation.

The principals were able to look fairly straight in the eye at the frustrations of both teachers and administrators. They recognized that there are a variety of pressures and deadline demands which can create chronic frustration for many people.

When it came to the point of discussing the threat which an administrator presents to some or all of his teachers, the principals found it somewhat difficult at first to accept the possibility that such a state of affairs might exist. But then, they began to look at the problem in some detail and to discuss such matters as the principal as an authority figure in the school community by virtue of representing the board of education; that he is in a position to give or withhold what may be needed by a teacher; either supplies needed for instruction, favorable location

of a classroom, judicious scheduling of classes; or even attention and approval. The principals recognized that because teachers had learned to live with threat did not necessarily mean that they were not threatened or had accepted it. The extent to which a teacher might be wobbled by his presence might never be determined. Eventually, even the most considerate and thoughtful administrator, it was believed, should realize that threat in any authority situation is ubiquitous.

It should be pointed out that, in discussions of the kind held by the administrators, it is always easier to discuss the problems of teachers as such, that is, the problems of a group, than to discuss the problems of a particular teacher, especially as he interacts with the character and personality of the administrator.

Throughout this report we have tried to point out that the approach to discussing human relations problems is in itself, a technique. We begin by looking at them "in general" by way of films; or discussing theory, and so forth. Eventually, however, the process pays off to the extent to which we are able to look at concrete situations involving real people, including ourselves. The route begins with "the general" but must wind up with "the particular." To look at ourselves in particular is a considerable achievement on the way to better mental health.

The principals inevitably were led to consider the quality of the relationship between themselves and their faculties. They began by attempting to look at some of the characteristics of administrators as compared with teachers. Per corollary, the principals discussed their roles and their needs, and how these needs were met by the responsibilities of administration. They recognized that to some extent at least, administration requires a certain amount of aggression.

From this point it was easy to consider the meaning of "self-concept." One member of the group, for example,

courageously discussed the insight he had gained regarding his motives for becoming an administrator. He recognized that some of his unmet needs as a boy — needs growing of some feeling of inferiority — might now be compensated for by his work in administration.

It was logical at this point to look at the meaning of perception: namely, that the principal sees the situation one way, the teacher, or other members of his staff, see it another way. After viewing the film "Perception" they recognized that good human relations could be blocked by a distortion in perception. Each person sees the situation from a viewpoint which is undoubtedly conditioned by his own background and current needs. The group concluded, after considerable discussion on perception, that a situation might always be improved whenever there is conflict between human beings in the school or the community or the home, by asking the question—"How do you think he sees the problem or the situation?"

With time, the administrators were more able to bring their respective personal human relations problems before the group for discussion. In doing so they could not avoid considering the importance of communication in human relations. This problem was brought into focus by role-playing, and by carefully examining the meaning of words used in a conference between an administrator and a teacher or a parent. They recognized that such a conference could take on volatile dimensions if words used were emotionally loaded and had different meanings for different people. For example, one principal brought up a situation in which a teacher was caught in the squeeze between certification requirements and the demands of personal problems which made it difficult for him to meet both requirements at the same time. After describing the situation the principal involved assumed his own role, and another principal played the role of the teacher. After role-playing this situation, other members of the group

commented on the statements made by the principal in response to those made by the teacher. The implications of a statement, or even of a word, were scrupulously examined. Whenever possible, statements were reconstructed more precisely and consequently resulted in better understanding.

Another administrator wanted the group to discuss a relatively simple problem involving the status of a bus driver. The group worked on this problem for two sessions. In this situation, there were two major areas to consider: 1) a complication in communication, and 2) the low self-concept of the bus driver. As it turned out, the bus driver's self-concept had apparently been much lower than the administrator suspected. This led to a breakdown in communication. After the group discussed this particular problem from every angle, they concluded that what may appear on the surface to be a minor problem to the administrator, who is busy with many other—and often complex—problems, might be a very significant problem to the person not in the administrative role.

It is interesting to note that both the administrators and the clergymen who later became involved in the Project, wanted to discuss the implications of perception and communication as these topics are involved in the problem of meeting public expectation. In both these groups there was some feeling that the public's perception and that of the individual involved may be incongruous. School administrators recognize the importance of their position in the public eye. Furthermore, studies have shown that pupils look to the high school principal as an example of exemplary behavior and as a person possessing psychological insight. There are implications here for the grist of a mental health project; or in considering the mental health aspects of the administrator's situation.

This careful examination of human relations problems by way of role-playing, and within the framework of per-

ception, threat, and frustration turned out to be a most effective way of helping the administrators not only understand basic psychological mechanisms but more clearly to see their roles in the complex milieu of administration. In fact, this particular in-service experience made such an impression on some administrators that three years later they suggested that an account of their role-playing experiences be included in an orientation program for all new teachers coming into Lewis County.

From time to time the group considered some of the elements which maintain homeostasis within the school, and how this can be disrupted if the administrator fails to recognize the reality of collective emotion in his school. He may unwittingly throw it off balance by unwarranted or unprepared-for changes in routine. Related to this, the group aired their views on "stress" as this was manifested by teachers and pupils, and some of the conditions which contribute to stress within the school. For example, changing teacher's schedules without adequate preparation of teachers for change; giving a teacher a difficult group to handle at the last period of the day; or issuing bulletins on matters which should have been discussed before taking action.

Lectures were few, but were occasionally needed to change the pace, and to present material to the administrators which might be useful in the light of points brought out in discussion. For example, it became apparent as time went on that an administrator needed a simple but workable theoretical frame of reference with regard to behavior. At that time, a frame of reference which seemed most appropriate and easy to comprehend in its bare framework was an adaptation of Maslow's "Needs Theory." An outline of Maslow's theory of human motivation, adapted from his book, "Motivation and Personality,"[7] was presented and discussed (see Appendix

A). Briefly stated this is a hierachy of five major "needs" areas:

First need ..... Physiological
Second need ..... Safety
Third need ..... Love
Fourth need ..... Esteem
Fifth need ..... Self-actualization

(This need is seldom, or ever achieved, unless more basic needs are satisfied).

Three important generalizations were pointed out in the discussion:

1. Needs are arranged in such order as to require the gratification of one manifest need before moving on to another. Gratification, however, is not merely satisfaction but is a means of releasing tension.
2. Failure to meet needs at one level, such as "esteem" needs, stimulates the individual to fall back to needs of another level, or vice versa. For example, when love needs are not met, these may be substituted by moving up to esteem needs, i.e., a person who feels unloved may compensate by acquiring status, or reputation for achievement.
3. Teachers might find the following generalization to be more useful than any other: only unsatisfied needs act as strong motivators of behavior. In other words, this generalization suggests that any deviate behavior is a signal that some basic need is not being met.

Another useful frame of reference discussed is the one developed by Havighurst, known as "Developmental Tasks."[3] Again, at the risk of over-simplification, the position taken by Havighurst is that at certain stages in the development of a child, by the very nature of his own growth processes, and the demands of the culture, he automatically wants to learn certain skills to prepare himself for what will be required of him as an adult. This does not mean that every adolescent at age twelve and on the

same day begins to work on the developmental task of "learning an appropriate masculine or feminine social role"; some twelve-year-olds mature more slowly than others. But generally speaking, at about age twelve, the adolescent begins working on the developmental tasks common to twelve-year-olds, whether parents or teachers know it or not. Another way to look at this matter is by way of assuming that the ten developmental tasks of the adolescent peer group, or some variation, or omission thereof, is the major agenda as far as the youngster is concerned. Some of the developmental tasks are more apparent than others—depending upon the individual involved—and may be quite volatile. The emotion which is generated thereby, and the sometimes bizarre way in which a youngster attempts to meet the requirements of his developmental tasks, causes a parent to wonder what is going on, as the youngster oscillates between meeting the demands of his developmental tasks and retreating to the security and certainty of an earlier state of development. In any case, if a youngster by-passes a developmental task, he will run into it sooner or later, only to find that it is much harder to learn when he is no longer an adolescent than it would have been at the required age. Boys and girls have a legitimate claim to the fulfillment of these tasks, and regardless of the bill of fare provided by the school, they more or less work on these tasks at all times. (See Appendix B for list of tasks)

What has this got to do with mental health? Mental health is enhanced, not only for the pupils, but for the teacher as well—and we might add the parent too—when there is recognition that a growing boy or girl works on these tasks. In other words, much of the so-called academic studies in the typical high school might be more eagerly pursued by many pupils if all concerned in teaching them would recognize that the developmental tasks of the adolescent could be used for motivating him and

embellishing the curriculum. It doesn't take much thought to realize that while a youngster may find intellectual satisfaction in pursuing some particular subject, this is not the only cause for his efforts. He dreams of the time when he will be independent of parents, economically independent by having an occupation; when he will have a home of his own; and when, perhaps most difficult of all, the value system of the society in which he lives will make enough sense for him so that he can commit himself to it wholeheartedly.

Mental health is enhanced when the youngster's efforts and goals are as consistent as possible; when at least some of his curriculum is based on his need for finding immediate personal meaning in life.

As this group moved along the way to better human relations it should be apparent to the reader that two important milestones had been reached. 1) By taking two entire afternoons to discuss a relatively minor problem involving a bus driver, and his needs, indicated that the administrators were becoming more aware that minor details in human relations are important and are not similarly perceived from the top of the totem pole as they are from the bottom. 2) The group had now arrived at the point where they not only could take two entire afternoons to examine and discuss the bus driver situation, but they did so willingly. When the discussion ran over the usual time for closing they wanted to continue discussing this question. Furthermore, there was increasing expression of dissatisfaction by some of the group if the afternoon meetings were cut short; they wanted the time extended. Apparently the quality of the sessions with Dr. Gosline and with Dr. Prescott (which will be described later), had made an impression! The administrators had tasted the professional satisfaction of looking at human relations in detail and depth; they became more eager to explore intensively other problems.

In conclusion, these meetings demonstrated certain important processes necessary to help administrators toward a broader and deeper understanding of their role.

1) Instead of discussing human relations in the abstract, their understanding developed through discussion of actual situations within the schools.
2) By role-playing, they recognized certain aspects of a problem heretofore unnoticed.
3) The principals increasingly realized on the one hand that human behavior sometimes doesn't seem to make sense; on the other hand, with some understanding and thought, the emotion involved in a concrete situation can be recognized and its logic understood.
4) In all the situations discussed, the importance of two-way communication became noticeable.
5) None of the human relations problems discussed could be adequately understood without placing them within the context not only of the school, but in the context of an individual's life outside the school community.

The latter point became increasingly apparent when the principals discussed such a simple thing as a pupil who lived in a home where the father worked a night shift. This meant that during the day while the father slept, the child had to be silent at home, but during the school hours took his restraint out on an already annoyed and possibly insecure teacher. Since this problem eventually could wind up in the principal's lap, it was obvious to the group that in this particular situation, as in many other similar ones, the administrator was dealing with an annoyed teacher, an irritated child, and a complex family situation. In other words, whether school personnel wish it or not, the child inevitably brings to the classroom the stress and strain of his home milieu. *He does not hang himself and his past on the door outside the classroom as he does his hat and coat.*

CHAPTER V

The Teachers Study Children

Because the results of the Child Study program in Lewis County seemed so meaningful with respect to the Project goals, a somewhat detailed description of this is essential. Child Study means exactly what it says: the methods used and point of view expressed combine to produce a more or less profound understanding of human behavior. This is all the more striking because teachers are accustomed to hearing about their responsibility for knowing the individual child, and recognizing individual differences, yet are unable to do so for several reasons. Studying an individual child requires a synthesis of scientific knowledge now available about children, together with data obtained by observation over an adequate time span. This process eventually leads to understanding the forces which impinge upon a child, and make him what he is. It is most difficult, if not impossible, for teachers required as they are to instruct a class of so many pupils, trying to meet deadlines, to study an individual pupil. Prescott states:

> "Obviously teachers can learn the scientific facts they need only gradually. Equally obvious is the fact that no teacher can gather each year all the facts he needs to understand each child as an individual. The gathering of the necessary facts has to be a continuous cooperative activity involving the school nurse and doctor, the visiting teacher and the school psychologist (if the school has these), and the teachers who, one after another, guide the child's learning.
>
> "However, even when teachers have the scientific facts they need and the necessary information about individual children, they have to be trained in scientific methods of interpreting these data. Clinical psychologists, psychiatrists, and the psychiatric social

workers, require this training and teachers are no different from other professional persons." [12]

Teachers are under tremendous pressures to meet many requirements—some clearly perceived—and some quite elusive. During this period of transition in American education, in view of what has just been stated, many teachers undoubtedly are thinking as Hamlet did when he said, "the time is out of joint."

Before giving a brief description of Child Study it will help the reader to know something of the nature of a pervading problem in teaching to which Dr. Prescott and his colleagues have long addressed themselves, and something about the refreshing solution to the problem which he presented to the educators of Lewis County. Dr. Prescott has long maintained that teachers, regardless of what they teach, ultimately must make judgments about children; and that these judgments are crucial in the life of the child. In order for these judgments to be as valid and helpful as possible, they must be based on facts—not opinions. Prescott maintains that the scientific knowledge about child growth and development now available to teachers and others can only be put to use if a child is studied over a period of time, and within a frame of reference, as described in the following paragraphs.

He illustrated the cogency of his point of view by demonstrating the tendency of administrators and teachers to pass judgment on children without adequate information. He did this by giving the group a limited amount of information on a pupil and then asking the group for a diagnosis as to the cause of the pupil's behavior. After giving more information, he repeated this performance; thus, giving additional information on the child, and continuing the above process, drove his point home: each diagnosis was modified with additional information. Instead of talking abstractly about children, Dr. Prescott used

the records of only two pupils as the basis for all observations and generalizations he made regarding the growth and development of children.

The Child Study program for teachers in Lewis County began the week of May 16, 1960, with approximately the same group who had met at the Colgate Inn at Hamilton, New York, the previous fall. Inasmuch as agreement had been reached on the desirability of making this program available on a voluntary basis to teachers of Lewis County, it was thought that the program for the teachers would be more effective if the administrators had an overview of it prior to the teachers. This consisted of a series of five consecutive seminars beginning at 2:30 in the afternoon and ending at 8:30 p.m.

This Child Study program is unique. It might be termed a "package deal," which includes training sessions for group leaders; consultants who make three visits each year to stimulate and guide the group, and who also give a series of lectures on topics or issues related to child development. The program has built-in "do-it-yourself" features which enable autonomous groups of teachers almost to carry on for considerable time by themselves.

The headquarters of the program are at the Institute For Child Study at the University of Maryland. Dr. Daniel A. Prescott, prime motivator of the Child Study program, was serving as Director of the Institute. Fortunately, for the Lewis County group, he was the person available to instruct them. Although some of the administrators had participated in case-conferences and other informal conferences on individual pupils in their respective schools, and had noted the positive results of such experiences for both pupils and teachers, no one was aware at the time the Child Study program was started in Lewis County that "the educator's view of what children need for promotion of their mental health expressed by Dr.

Prescott would no doubt find support among most psychotherapists . . . " [10]

The fact that individuals differ from one another, and that these differences must be taken into account in teaching them, is probably the most repeated axiom in educational literature. But, strangely enough, it is the axiom taken least seriously. And, so Prescott emphasized that it doesn't do any good to know that individuals differ unless one knows "which" individual, and all the details about the individual which make the difference. Throughout the week, then, members of the group became acquainted in detail with the growth patterns of two pupils in depth within the frame of reference developed at the Institute.

Briefly put, the framework for analyzing a human being is as follows:

1. *Physical Factors and Processes:* Growth rate, energy output, state of health, history and habits, limitations and how they are handled, how the individual uses his body and, what he looks like.
2. *Love Relationships and Related Processes:* The relationships of the individual to the important persons around him; the difficulties involved and how he responds to these.
3. *Cultural Background and Socialization Processes:* Subcultures, social institutions such as the school, etc., inconsistencies between the cultures and the way in which the individual handles these; and any special pressures felt by the child.
4. *Peer Group Status and Processes:* Characteristic behavior in terms of the various peer groups to which he may belong; and understanding of the requirements of the peer group.
5. *Self-development Factors and Processes:* The individual's self-conception; his perception of the factors and forces which impinge upon him, and the manner in which he reacts to these; and the potential which he has for improvement in this respect.

6. *Self-adjustive Factors and Processes:* The qualitative appraisal of the individual's feelings about himself in relation to the forces about him; and the way in which he adjusts to situations where his self-concept may be challenged.

The above is a brief description of the areas on which data are needed in order to study a child effectively. The procedure by which these data are collected, assembled and used will be described later in this report. Meanwhile, the week of May 16 passed very quickly, and the closing session on May 20 came all too soon. Prescott summarized what he had presented to the administrators during the week. *He demonstrated that when the scientific knowledge available about child growth and development is put into use there are observable results!*

Dr. Prescott pointed out that experience is not something going on in a vacuum, but is a constantly changing and complex combination of forces acting both outside and within the child. Over and over Prescott stressed the importance of looking at a child as a person rather than seeing him as someone to get a "sure fire answer" from. Although it was not possible during these five sessions with the administrators, even to begin to reproduce the experience of Child Study which the teachers would share in later on, Dr. Prescott had nailed down the idea that observing children and gathering data about them must proceed in a scientific and orderly way; and that making significant decisions on children should be considered as a vital process in the child's life; and most certainly not something to be done haphazardly.

As the administrators commented on the program it was obvious that they were impressed with the philosophy and procedure described by Dr. Prescott. One principal stated "Teachers really don't see individual pupils; they see only groups." Another pointed out that, "It is encouraging to know we can help a pupil in spite of his charac-

ter." And another expressed his optimism in that "something *can* be done" for children. Dr. Prescott demonstrated that "Behavior is caused and the causes are multiple," heretofore felt by many to be more or less a cliche; and the administrators had been impressed with the demonstration. As one principal pointed out "Prescott has helped me put things together."

Because so many hours had been spent looking at only two children, even though they were personally unknown to the administrators, the children had become alive. There was more or less identification with them. One administrator even spoke of "getting to know and love him," and stated "what an awful job just growing up" can be. The record shows the administrators had learned much about studying children as well as gaining inspiration for helping their teachers better understand the way in which children can be expected to behave as they move along the occasionally thorny path to adulthood. Furthermore, during the week, the administrators recognized and deplored their lack of contact with pupils, occasioned by their many other duties, a condition frequently sensed by teachers.

It is difficult adequately to describe the noticeable reaction of the administrators to Prescott's presentation at the conclusion of this particular week. Perhaps the most insightful clue to their response to the program is the fact that several pointed out that despite the demands made on them during the week—that they had both to meet the full responsibilities in their respective schools as well as to attend these sessions—they had found it easier to handle their school problems that week than would have seemed possible under the circumstances.

In addition to what was learned directly about the Child Study program, there was a subtle but notable benefit which accrued to the members of the group as a result of this series of meetings. While working with Dr. Prescott, members of the group had been enjoying each other's

company; and especially enjoyed the fellowship during the evening meal they had taken at one of the local restaurants. By virtue of his role as an administrator, and because of the isolation of some rural high schools, the administrator tends to feel isolated, and needs the reinforcement of regular meetings with other administrators. This point was also stressed by the clergymen as their meetings with Dr. Gosline progressed, namely, that by coming together they reinforced each other as human beings—simply through the social aspect of the meetings. This was also true of the counselors. Although no study was made on this point, one might assume that the mental health of the members of the above mentioned groups was enhanced by frequently meeting together.

Dr. Prescott returned to Lewis County in August, 1960, to conduct a two-week workshop at the Lowville Academy and Central School for twenty-five teachers from the nine county schools. Every teacher came with the understanding that in each school where one or more Child Study groups might be formed, two teachers would serve as the group leaders. A small library of books pertaining to child growth and development, human behavior, etc., was collected for the workshop.

Dr. Prescott lectured for about an hour each day; but for the most part the time was spent in discussing the significance of the data assembled by the teachers in the group, and of organizing it into the categories developed by Dr. Prescott at the Institute for Child Study. Briefly stated, and at the risk of over-simplification, a Child Study group proceeds as follows:

1. Teachers keep what is called a "Behavior Diary"—or Journal on one child. This child selected for study preferably should not be a problem child, but one who appears to be as normal as possible. The aim of Child Study is simply what it states: to study the child, not to reform him. However, it

must also be pointed out that when teachers have had an experience in Child Study such as the one described here, they are much better equipped to cope with a problem child than they might otherwise have been.

The first entry in the diary consists of all the vital statistics available on the child as these are found in his current school record form. When it is possible, which may be only once a day, the teacher notes particular bits of behavior, and recording both time and date, puts this into the diary. Once each two weeks, the Child Study groups, usually consisting of about fifteen teachers—all of whom have volunteered for this experience—meet after school to read their diaries to one another. As one teacher reads his diary, the other teachers comment on the quality and the accuracy of the entries. Since the group leaders have already had some training in this process, an occasional question from them suggests the procedure which other members of the group might follow. These questions usually take the form of asking the teacher who is reading the diary to verify the data, often with the implication that the entry contains words of such a character as to require interpretation. This leads the teachers to recognize that value words such as good - bad - lazy, etc., have no place in the diary. Rather, the entries should be of such character that the writing is completely descriptive, or at least as descriptive as possible. To put it another way, the entry does not contain the teacher's subjective opinion of what took place. For example, the teacher in this process would not include a statement such as "The child seemed to feel sad." Rather the teacher would describe the posture of the child, what the child stated, the contours of the appearance of the child's face, and so forth.

One striking aspect of this experience is that teachers quickly catch on to what is required of them, and indicate how much personal satisfaction they get by learning how to write accurately and to portray factually what they see about children.

2. Next, the teachers proceed to do what Prescott calls, "Locating Areas of Ignorance." This is done by classifying the areas of information under a code number similar to the Dewey Decimal system, and then spotting the gaps by reviewing the numbers. The six areas on which information is required have been briefly described on pages 35-36.
3. When the diaries of the teachers contain a substantial amount of data about a child, the teachers proceed to what Prescott calls, "Making Multiple and Tentative Hypotheses" about the causes for any particular bit of the child's behavior. They are encouraged to make up as many as twenty or more of these, if possible. Taking one teacher's diary at a time, and continuing through, before proceeding to another, the hypotheses are verified or unverified by reading the material in the diary to see whether or not the evidence already collected supports or does not support one or more of the hypotheses.

   This is stimulating exercise for teachers in that it usually reveals, at least the first experience does, that judgments made by teachers about children are more often than not unsustained by the facts. This stimulates them to move on to prove whether or not the axiom "that behavior is caused" can be verified. For many teachers this approach to Child Study may be the first experience in dealing with scientific data about children. Teaching, thus takes on a new meaning. Some of the uncertainty and fuzziness involved in knowing children disappears; a measure of certainty and security emerges.
4. The next step in Child Study requires the teachers to look for patterns of behavior which recur; and to seek for causes via the multiple hypotheses method. This not only helps teachers to identify the patterns and situations which are repeated in the child's life; it also helps them understand the characteristic methods used by the child to handle these situations. When this exercise is repeated several times, teachers are in a position to understand and assimilate psychological principles which in most cases heretofore were only theory to them.

THE TEACHERS STUDY CHILDREN

Teacher education has increasingly become a target for critics of American public schools; but, also, by some who believe in the general soundness of American public schools. Essentially, one basis for the constructive criticism is that teachers are subjected to fragmentary experiences, i.e., courses in psychology, child growth, and so forth, which they are assumed to be able to integrate when they get into the classroom. The assumption is erroneous; and teachers frequently speak of the frustration attending their inability to put theory into practice. One might speculate whether or not such frustration effects the mental health of teachers. In any case, the data presented later in this report is interesting in relation to such speculation. Teachers in Child Study do integrate their knowledge. By studying a child as a growing human being in *his* context, and via *his* perceptions, the teachers inevitably synthesize their knowledge because of the process built into the Child Study program. They see results, both in the child and in themselves.

The first year of Child Study ends after the teachers have answered five questions:

1. What was the child working on during this year?
2. What was he up against?
3. What assets did he have?
4. What did the school do to help him accomplish what he was working on and to deal with what he was up against?
5. What can the school do in the future to facilitate his best development?

The next two years of Child Study takes the teachers through not only a refinement of the first years experience; they also acquire more knowledge in those areas of the behavioral sciences which help them better understand children: cultural anthropology, sociology, and psychology. (For a complete description of The Child Study program see reference 12. See also reference 11.)

The Child Study program continued for two years in most of the schools involved, and the teachers at Lowville Academy & Central School insisted on continuing the program for a third year. All together, the program included three summer workshops, led by nine members of the Institute staff, and three visits each year to the various groups by someone from the Institute, as well as the delivery of three lectures each year to all the participants. During the second summer, two elementary teachers attended a six week session at the Institute.

Schools everywhere include pupils who, at some time or other, and for varying reasons, run into difficulty. There are many ways to cope with these situations, some more effective than others. The basic ingredient in one successful formula is to take an objective look at the pupil. When a group of teachers do this, looking at all the details of his background, history, assets and liabilities, something intangible happens. It has frequently been observed that the teacher sees the pupil in a different light than he did prior to this experience; and, as a result, teachers have repeatedly been heard to say something like this—"He is no longer a problem for me." Or, "I think he's changed for the better," when probably what did happen was that the teacher's perception changed, and this subtly effected the child.

In evaluating the Child Study program, the researchers decided to discover what effect, if any, this program had on the pupils of the teachers who were in Child Study. This was done by asking the question, "What is the relationship between teachers participating in the Child Study program and the number of perceived problems of their pupils?" Even at the risk of boring the reader, it seems necessary to describe this research in detail, especially since this particular problem had never been researched and because the results are meaningful.

The tables below give the reader the statistical results

of this study, which may be briefly described as follows:

Fifth grade pupils of the Child Study teachers, 185 pupils in all, were given the Junior Youth Inventory.* This is a series of 168 statements, divided into five categories: (1) About Me and My School; (2) About Me and My Home; (3) About Myself; (4) Getting Along with Other People; and, (5) Things in General. The statements are constructed in such a way as to indicate some desire, need, or dislike by the pupil. Although divided into five categories as shown above, the statements may be rearranged under several other categories by the teacher or guidance counselor, so that the results may be used for analysis of pupil needs in areas other than those listed above. The pupil is asked to check each statement as a Big Problem, a Middle-sized Problem, a Little Problem, or No Problem for him. After he has done so, he is then told to draw a circle around the three problems he would most like to solve. In addition, the Inventory was given to other fifth grade pupils in Lewis County whose teachers had never participated in the Child Study program; and to a sampling of fifth grade pupils outside Lewis County whose teachers had not participated in a Child Study program.

Pupils and their teachers are identified as follows:

A1—Teachers in Lewis County who had been in Child Study two years

A2—Teachers in Lewis County who had been in Child Study one year

B—Teachers in Lewis County who had not been in the Child Study program

C—Teachers outside Lewis County and who had not been in a Child Study program

It was not possible to use controls in terms of ideal research design since no pre-test was employed, and since

* Science Research Associates, Inc., 259 East Erie Street, Chicago 11, Illinois.

the teachers volunteered for the Child Study program. However, if the teacher groups involved are similar in major characteristics and in the amount of academic knowledge about the psychological principles which underlie behavior, we may assume that there is no bias operating in the characteristics of the groups except that which has been acquired in the Child Study sessions. A third group outside the county provides a sampling of manifest problems of children of comparable age and grade and eliminates the possibility of bias if their manifest problems are similar to those of pupils in Group B.

The reader will note that the pupils of teachers in the Child Study program perceive themselves as having significantly fewer problems of a school nature than pupils in groups B and C; but that there are no significant differences in the mean scores of the other four constructs. Although there is no significant difference in the mean scores of groups A1 and A2 and B on the third construct—"About Myself"—the difference in this case may be clinically significant. Since the program of Child Study was held in a school setting, and was designed to help teachers better understand the psychological principles which underlie behavior, there was no reason to believe the program would decrease problems of a different setting.

One other fact regarding the teachers in Child Study should be noted with respect to the study reported above, namely *that the teachers in Child Study had an average of twelve less hours graduate work than all the other teachers in Lewis County; and the teachers of the Control group outside Lewis County had an average of from ten to nineteen hours more graduate work than the Child Study teachers*, and taught in an area where the pupils might be considered upward striving. This fact takes on added dimension when viewed clinically. Although the teachers in Child Study had significantly less formalized education

TABLE I

Means and Variances of Groups A1, A2, B and C on the S.R.A. Junior Inventory

	A1		A2		B		C	
	Mean*	Var.	Mean	Var.	Mean	Var.	Mean	Var.
1. About Me and My School	29.70	306.00	28.70	283.84	41.64	339.20	35.43	318.03
2. About Me and My Home	10.09	81.64	10.44	67.23	14.31	83.14	11.13	81.15
3. About Myself	26.25	493.42	26.32	412.06	31.68	509.93	27.39	404.30
4. Getting Along with Other People	17.24	328.43	17.57	279.93	23.31	357.03	16.36	184.18
5. Things in General	23.08	264.04	23.68	230.20	29.24	209.95	20.90	149.40
6. TOTAL	106.15	5689.52	105.71	4461.06	140.88	5176.98	110.08	4312.28

Mean*—Indicates number of problems.

than those not in Child Study, they apparently had more information on the behavior of children, as shown in the results of the study reported below. The reader may draw his own conclusions as to the implications of this fact as this relates to the training and selection of teachers; and it is hoped that further research will be conducted in this direction.

In addition to the above, another question was asked: "Do the teachers who have been in Child Study show more sympathy toward pupils than teachers who have not been in Child Study?"

To obtain data on this question, the Minnesota Teacher Attitude Inventory* was given to three groups of teachers as described below.

1. Teachers of Lewis County participating in the Child Study Program for at least one year. This group will be referred to as C.S.T.
2. Teachers of Lewis County not participating in the Child Study Program. This group will be referred to as N.C.S.T. and consisted of both elementary and secondary teachers.
3. A group of teachers from a community outside Lewis County, but similar to Lewis County, who have not had the opportunity to participate in a Child Study program. This group will be known as the Control group.

The C.S.T. group numbered 82, with 8 men and 74 women. They had a mean age of 45.60 years and an average of 15.23 years of teaching experience. The N.C.S.T. group consisted of 238, with 109 men and 128 women and one who did not check the information blank as to sex. They had a mean age of 38.17 years and an average of 12.32 years of teaching experience. Since the composition of the two groups differed somewhat as to the percent of men and women, and the number of years of teaching ex-

* The Psychological Corporation, 304 East 45th Street, New York 17, N. Y.

perience, it was important to obtain scores of a group of teachers very similar to the Child Study group on these two factors. This third group, known as the Control group, consisted of 59 teachers from a community outside Lewis County. None of the 15 men and 43 women had participated in a Child Study group. They had a mean age of 43.88 years and an average of 14.68 years of teaching experience.

By referring to Table II, the reader can note that the C.S.T. group obtained a mean score on the MTAI of 136.45 and that the Control group had the lowest mean, 112.15; the N.C.S.T. group (Lewis County teachers) possessing a mean of 118.47. Thus we note that the average score of each of the two Lewis County groups was in the direction that indicates they have more "feel" for children than the Control group.

To enable a statistical evaluation of the significance of the mean differences among the three groups, a critical ratio was obtained. These data are shown on Table III. The significant higher mean score (1% level) of the C.S.T. group over the mean scores of the other two groups may have resulted from participation in the Child Study program. The mean scores of the control and N.C.S.T. groups did not differ significantly. However, the fact that the non-Child Study teachers of Lewis County have a higher mean score may have resulted from, either (1) a generalization of the effects of the Child Study program for teachers who did not participate but who came into professional contact with those who did; or (2) because of the continuing in-service programs provided by the District Superintendent for the school administrators, as well as the variety of in-service programs provided by the administrators for their respective teachers. Even though the turn-over of teachers in Lewis County amounts to approximately fifteen percent per year we might hypothesize that despite this turn-over, the continuing efforts by the ad-

ministrators and the teachers to understand children and youth have resulted in a more positive attitude of teachers toward children.

TABLE II

Minnesota Teacher Attitude Inventory Scores of Three Groups of Teachers: the Child Study Teachers (C.S.T.), the Non-Child Study Teachers (N.C.S.T.), and the Control Group

	N	Mean MTAI	Variance MTAI
C.S.T.	82	136.45	1056.14
N.C.S.T.	238	118.47	1407.97
Control	59	112.15	1015.48

TABLE III

Significance of Mean Differences of the Three Teacher Groups

	N.C.S.T.	Control
C.S.T.	3.77*	4.39*
N.C.S.T.	——	1.26
Control	——	——

* Mean difference significant at the 1% level.

To summarize: The mean score of the Child Study teachers (136.45) was significantly higher, and shows a more positive attitude toward pupils than the teachers not in the Child Study group or in the Control group. The pupils of the teachers in the Child Study program perceived themselves as having significantly fewer problems with respect to school than do the pupils of the Non-Child Study teachers and the pupils of the Control teachers. One conclusion to be drawn from the preceding data is that the more positive attitudes toward children are found among those groups of teachers with significantly less formal education than among the remaining teachers!

CHAPTER VI

The Counselors' Role

When the Project was planned, it was assumed that eventually the counselors of the nine Lewis County schools would be brought into the program. Exactly how and when was not clear; but the reader will recognize that the point of view of the District Superintendent, who had himself been an elementary school principal and supervisor, would inevitably coincide with principles of guidance. The counselors' knowledge of behavior, their skills in the use and interpretation of standardized tests and other media for evaluating and recording the behavior of pupils, represented a considerable reservoir of skills. Such know-how might be put to broader use, particularly in helping teachers gain more understanding along these lines. It was assumed that their own skill in counseling might be developed and extended.

The Consulting Psychiatrist met with the counselors, the School Psychologist, an elementary school supervisor, a school nurse, and the Project Coordinator for the first time on March 23, 1959. The counselors had brought with them case records of pupils who needed special attention. They discussed these cases with Dr. Gosline, and did this from time to time until March 8, 1961, when the more intensive program described in this Chapter was begun.

Dr. Gosline was favorably impressed with the group's maturity and professional knowledge so he proposed that they consider taking part in a special group experience which had been anticipated during the emerging days of the Project as an eventual possibility for some groups. The experience would consist of twelve meetings without agenda, aimed at gaining insight into group dynamics, but stopping short of group therapy. This would enable each

individual to observe behavior, and the emotions involved at close range.

It was agreed that participants would not discuss their experiences with anyone outside the group membership. Refreshments were served; occasionally the group had dinner together.

The Coordinator served as observer during the first twelve meetings. He made "Flow Charts"; recorded the quantity of participation by each member; and tried to summarize each session. However, the following year, during which twelve more similar meetings were held, the Coordinator became an active participant. All sessions were recorded on tape and, after each meeting given to the Consulting Psychiatrist for his analysis and use only.

Since there was no agenda, and members had different goals in mind, the first sessions were an interesting experience in the dynamics of what occurs when some individuals attempt to structure a meeting in terms of their particular needs and perceptions, while others resist these efforts. Since some participants had more need for structure than others, they repeatedly wanted to know "what the group was supposed to do." They found it difficult to realize that this was not a discussion group bent on solving a particular problem nor discussion of a topic to which they might contribute opinions or possible solutions.

As is true in any group, the effort to find one's role became part of the agenda—and continued to be for some time. In this respect, the status of individuals was an observable dynamic. The Psychiatrist's role, never overtly described, was the focus of attention off and on throughout the subsequent twenty-four meetings. Although it cannot be said with certainty, it appears that as the members became more emotionally involved in the procedure, his role took on more meaning: the group was seeing at first hand some psychiatric techniques put into practice.

Others wanted to delve into their own "psyche." This,

in turn, was resisted by those who, for reasons known only to themselves, wanted to avoid such an experience. At a point such as this, for example, the group became fragmented; members took sides, so to speak. This happened when some members wanted to discuss the motivations of other members which led them to their present occupations.

Whenever the discussion involved strong feeling, for either a segment or for the entire group, they frequently retreated by "intellectualizing," i.e., continuing the discussion, but removing its essence from the scene. Another way to describe this process might be to point out that instead of discussing an observable feeling reaction, the group would switch to theory, or to giving an illustration of the phenomena which occurred at another time in another situation.

As time went on, however, perception became sharper, and some members noticed clues to others' behavior and possible feelings. Prolonged silence by a member, for example, evoked discussion as to the cause of his seeming withdrawal. Slight changes in seating arrangement were noted, and sometimes commented on.

A member's absence from the group might cause a reaction, particularly if the group had the slightest inclination to interpret this behavior as rejecting the group.

Eventually, it became apparent, even without an agenda, that the first statement made at a meeting sometimes turned out to be the agenda. This observation led to discussion of motivation; unconscious efforts to structure or control the discussion.

At one point during the first twelve meetings, several members of the group spoke of the continuing effect of their experience as this was reflected by comments about their behavior made at home by their spouses. The general nature of these comments indicated the pre-occupation of the member with the meaning of his experience.

As the group coalesced, and the element of threat diminished, members were able to point out and discuss the dynamics in terms of the aggressive behavior of another member; or of hostility; or feeling of responsibility to the group; or the forms of defense used by members. They became sensitive to the slightest variation in group climate, and looked for both the cause of the variation as well as their personal reasons for their reaction. Members were able to look back to, and frankly discuss, earlier events, previously not understood or too threatening to discuss. They noted that an individual's security required him to keep his cards close to his chest until the bidding was well underway, with some indication of how it was going.

The Psychiatrist was seen more than heard; but his actions were closely watched. The form in which he was addressed by a member was a sort of gauge, particularly when the salutation changed. Where an individual sat in relation to him was grist for the dynamics mill. When the Psychiatrist did speak, either to ask a question, or suggest an interpretation, it was only to help clarify.

At these meetings, theoretical knowledge about behavior took on new meaning. For the counselors particularly; more or less for all who worked with individuals or groups. To some extent, at least, the term "feelings" became real, because of repeated experience in identifying these in the group situation.

This collection of people, nebulous at first, developed into a cohesive group, better able to tolerate the stress engendered by their group experience. Thy had, in terms of their individual standards and needs, come to know themselves in more detail and depth than ever before.

During the final year of the Project, the group spent the time available to it in discussing selected cases with the Consulting Psychiatrist. One case required as many as four sessions in order to get at the situation in detail

and to explore the possible dynamics of the entire family. In doing so, Dr. Gosline hypothesized as to the causes of interaction between members of the family, and, as a result of the group's previous experience, was able to present aspects of psychoanalytic theory in more detail and depth than would have been possible earlier.

One case revealed the extent to which there was inadequate communication between the local schools and community agencies working with youth who are in difficulty; especially when it became necessary to call on the Family Court for help. This difficulty was subsequently corrected.

During these sessions Dr. Gosline was able to give valuable suggestions on counseling techniques, particularly useful to those working with pupils with behavior problems. He pointed out the crucial importance of the first five minutes of a counseling session when, for instance, the pupil's behavior may be a subtle extension of his classroom behavior. This information is particularly cogent when it involves a withdrawn child; or one seeking sympathy. He illustrated the importance of listening for words with particular meaning for the pupil.

As the group members grew in understanding and knowledge, they increasingly recognized the hidden hazards and booby traps inherent in counseling individuals: the prospect of stoking up latent fires which might easily get out of control. *In this respect, Dr. Gosline's help was invaluable!*

No concrete data for evaluation were obtained from this group. At the close of each year, however, the group subjectively evaluated its experiences. Members recognized that few groups of counselors had such opportunity to participate in a continuing training relationship with a skillful, perceptive Psychiatrist. It was noted that throughout the three years the group remained intact, "there were no dropouts." Despite inclement weather, absence was due to unavoidable commitments of another

kind. One counselor may have summed it all up, when referring to advantages of highly-paid counselors in a suburban community, he said "We're ten years ahead of them in this respect. The experience we've had just isn't available to counselors!"

As a reminder of the dangers to mental health by the unwarranted use of standardized tests, as well as their inherent weaknesses, each counselor was given a copy of a book which described and emphasized these dangers.[2]

When the group first met, in March, 1959, the course ahead was not clear, and the Consulting Psychiatrist, playing somewhat by ear, was known to all as Dr. Gosline. In September, 1963, when the Coordinator met counselors here and there by chance, they invariably asked—"When are we getting started with Ernie again?"

CHAPTER VII

Other Teacher Groups at Work

In addition to the Child Study groups, other teacher groups were meeting from time to time to consider topics and problems for promoting the potentialities of boys and girls.

In one school the principal initiated a series of informal meetings for the elementary teachers. They discussed their frustrations when boys and girls did not respond to the teachers' efforts; made sociograms in order to better understand the class sociometric structure.[5] For several meetings they discussed an adaption of Maslow's "Needs" theory.[7] (See also Appendix) Inevitably they brought up cases of individual pupils who needed special attention. As a result, one pupil with an obscure physical disability, who was a behavior problem, was discovered and helped. Thus, the pressure resulting from his behavior was removed from both teacher and pupil.

In another school the Principal initiated and carried on a series of eight discussions on adolescent psychology with his high school faculty. A motion picture on some phase of adolescence was shown at the opening of each meeting as a starting point for the ensuing discussion. The record reveals that the impetus for the Principal's leadership in this respect grew out of the county-wide meetings of administrators referred to earlier.

Meanwhile, his elementary teachers were engaged in their own in-service meetings. They wanted to examine their reluctance to make home visits. After giving obvious reasons, such as lack of time and difficulty in travel, it became clear to them that the real reason was deeper; their fear of a new experience, and the possibility of rejection by a parent. As they explored this point in detail,

they also were able to recognize that teachers are held with esteem in this community and that parents would want to know beforehand of the visit so the house would be in order.

This brought up the importance of the initial encounter between parent and teacher, with its attending uncertainties. The teachers role-played what might be encountered. The teachers even acted out all the details of entering the house; the initial small talk between parent and teacher; and were helped to see the value of being forthright about the purpose of the visit. "I want to be as helpful as possible to your child and it would help me if you would tell me something about him." The parent might reply "What do you want me to tell you?" The teachers concluded the best response to this query would be, "Why don't you begin where you want to?"

These teachers also considered the kinds of statements or questions, which could be misconstrued, or which might put the parent on the defensive.

Repeatedly, throughout the Project, administrators and teachers were reminded of the crucial importance of both words and behavior during the first few minutes whenever two people come together to gain understanding from each other.

In another situation the teachers wanted to discuss "discipline." They were asked to list all the ingredients they could think of which might even remotely contribute to their difficulties in maintaining control in the classroom. They did so, and included such items as size of class, time of day, presentation of subject and so forth. Interestingly enough, however, they overlooked a major factor, namely, their own personal involvement, or the extent to which their personal authority was at stake. So they thoroughly and frankly discussed this matter, and by doing so, put classroom discipline into better perspective. It is easy for teachers to overlook the fact that their perception and

self-concept are ubiquitous components of the classroom scene, more or less affecting themselves as well as the pupils.

Throughout the Project, regardless of the groups involved, they were helped to become more sensitive to the feelings underlying the overt behavior expressed in human encounters.

CHAPTER VIII

The Clergy Enlist

The reader should keep in mind that the major goal of this Project was to demonstrate as well as discover how a rural community such as Lewis County could utilize its human resources for mental health. Clergymen often are, or could be, a tremendous resource in this respect. As early as the 'Twenties, the Reverend Harry Emerson Fosdick, former Pastor of Riverside Church in New York City, to name only one, had established a national reputation as a counselor, and was then working closely with a psychiatrist, to whom he referred individuals with problems which he believed were too serious for him to handle. Some theological seminaries have had training courses in counseling for years. Union Theological Seminary in New York City now has a full-time psychiatrist on its faculty.

Many clergymen recognize that counseling is both an opportunity and a duty; and people in trouble often seek their help. The clergyman's special concern is with ultimate values as these relate to human behavior. Because human beings often have difficulties in meeting demands of conflicting values, clergymen can help individuals see things in perspective: they can provide a special kind of love and understanding.

It was quite logical, therefore, to include Lewis County clergymen in the Project as early as possible. In 1961, the Project Coordinator broached the subject to a clergyman whom he knew had had some training in counseling. He explained the Project to him, and sounded him out as to how other members of the Lewis County Ministerial Association might react to having a series of meetings as yet unstructured—with the Project Psychiatrist. Later the Roman Catholic clergymen were included.

At the first meeting,* the ministers and the Psychiatrist, the Coordinator, and Paul Sohovic, the School Psychologist, discussed the program. Throughout this meeting, and not entirely missing from the next one, however, a more subtle activity was taking place, the title of which might be taken from a song in "The King and I" called "Getting to Know You." This was the first time that the Psychiatrist had met with a group of clergymen; and he was admittedly playing it by ear, taking into account that in some quarters psychiatry and theology have not as yet been integrated. On the other hand, some of the clergymen desired that the Psychiatrist discuss theology rather than his own specialty which he, gently, but firmly, avoided doing. It was in this area, and at this point, when the danger of running into unintentionally planted "booby traps" was at its peak. It was not long, however, until all met on the common ground which had brought them together, namely, how to help people who have emotional —trouble in living—problems.

It may be that an account of the substance of these meetings with the Consulting Psychiatrist can best be described by the questions which were raised at the initial session, and by the clergymen's comment during the evaluation. They asked such questions as:

1. How to breakdown the barrier which keeps people from seeking help from the clergyman on problems where he might be helpful? It was noted by one of the group, for example, that not many people will consult ministers on personal problems.
2. What can the church do to foster and promote good mental health habits?
3. What kind of program could be developed for churches in relation to mental health and how could such a group keep in contact with the people who are specialists in mental health?

* Most of the meetings included dinner provided out of Project funds, in order to expedite use of time available to the clergymen.

4. What can clergymen do, if anything, when they recognize that people need help, but don't want it?
5. What is a mentally healthy person and in what respect would this kind of person be synonymous with the Christian?
6. When and how can one tell that a behavior problem which may come before the minister is an emotional problem or when is it a problem involving "sin"?
7. What are some "basic principles" of mental health?
8. What can be done for ministers' wives (who are human) to help offset the particular strains which go with maintaining the high standards and values of the ministry?

Despite the variety and range of questions which were raised at the first meeting, before the meeting was over, the ministers were talking about some of the problems of the people with whom they had to deal; and from there on most of the discussion was problem oriented.

It is interesting to note that after the first series of six meetings, i.e., those which ended with the spring of 1962, all of them dinner meetings, either preceded by discussion or followed by discussion or both, the problems and topics which the ministers suggested for consideration the next year seemed to have practically no theological flavor in the sense that the questions and statements of the first meetings contained. The clergymen were interested in marital and pre-marital counseling; the tensions of married life; how to deal with infidelity and promiscuity; the problems of the aging and some of the anxieties involved. They wanted to know more about the symptoms of certain types of emotional disturbances; how to deal with alcoholism; teenage problems; attitudes toward death; pressures of social class; helping people who have physical handicaps; and finally, problems which all leaders have to some degree and from which clergymen are not exempt, i.e., problems with members of their own pro-

fession, with members of the congregation, leaders within the church committees, and so on.

To be sure, not all the time was spent on the topics mentioned above. After the Psychiatrist and the clergymen had become acquainted, the clergymen's curiosity about psychiatry came into full bloom. They asked Dr. Gosline to describe his training, and to discuss the meaning of psychiatry. He did so by way of an eclectic framework of psychiatry. From time to time the Psychiatrist was asked to elaborate on particular aspects of psychiatry, such as the characteristics of particular emotional disorders; and, to describe "What you do when the patient first presents himself in your office?"

There was never a dull moment at these meetings. It was an eager and vocal group of men! Even though individual clergymen represented a wide spectrum of viewpoints, background, training and experience, the problems they wanted help on were common to all. As it turned out, both the Psychiatrist and the Coordinator had underestimated both the sophistication of some of the group as regards counseling, as well as their eagerness to meet with the Psychiatrist, once the orientation period had been successfully weathered. Even in this respect, the heavy weather expected never appeared.

The clergymen eagerly made use of the Project library, which included books on pastoral counseling, and each member was given a copy of Paul Tournier's "Guilt and Grace." [14]

The last meeting of the group, held in May 1963, was devoted to an informal evaluation. Briefly put, here are the highlights, as stated by members of the group:

1. There had been some honest disagreement—but no "subversion." (We assume this comment was intended as a compliment to the Psychiatrist because of his integrity throughout his relationship with the group.) He never side-stepped a question—

even those intended to sound him out on theology.

2. The clergymen enthusiastically wanted to continue to meet with Dr. Gosline the following year.
3. Recognition of "hostility" as part of normal behavior and why. One member stated, "We had a memorable session on hostility."
4. A desire to know how ministers might include psychological and psychiatric material in their sermons.
5. Although somewhat "threatened" at first, the process had helped some toward "self-understanding."
6. "Now" as "never before" a local minister could more easily turn to a psychiatrist for counsel of a special kind when necessary. They felt reinforced.
7. Work with "young people" had been "helped by suggestions" obtained in these meetings.
8. People "have to want to come to a minister" before any help can be given.
9. Counseling, even by a clergyman, must be "nonjudgmental" and "without threat" to be "beneficial" and hence attract parishioners who need help.
10. Counseling involves "something very subtle," and one person may "get through," whereas another may not be successful, e.g., a psychiatrist may succeed where a minister has not been able to do so.
11. Counseling is not "mechanical; but something one feels," and must "experience" over a period of time in order to "understand."
12. Continue (next year) discussing "cases" for help on "counseling skills," and to understand "limitations" and when to make "referrals."
13. Clergymen in small towns and villages feel "isolated" and "lonely." Meetings of this kind help decrease isolation.
14. Suggestion that Roman Catholic and Protestant clergy meet "together occasionally." (One minister had asked if the Roman Catholic priests were also involved in the Project).

It goes without saying that this group (average attendance ten-fifteen; almost impossible to have perfect attendance) had had an unusual experience; and, were most enthusiastic about it. In company with a sensitive and perceptive psychiatrist, they learned something basic about psychiatry, i.e., it is a discipline of the highest order. Its goal is "to make a person whole." "To cure, the psychiatrist must accept an individual as he is." The ministers learned that the psychiatrist and the clergymen have much in common; both are concerned with the human need to be loved, and wanted; and to offset and prevent the ravages of distorted love.

This group of men—as was also true of the Roman Catholic priests — moved the community well along in proving that there are resources on which to build a community mental health program. In addition to the knowledge imparted, and the ideas exchanged, and points of view brought into rapport, these human resources have been strengthened by a warm, personal relationship with a Psychiatrist, who can be a "refuge in a time of trouble" —to help the minister to deal with the complex problems of those who come to him for help.

In the winter of 1962, the Coordinator held a conference with the local Roman Catholic priest to explain the Project to him and to invite as many of the county priests as cared to do so to meet with the Consulting Psychiatrist and the School Psychologist. It was pointed out that the Project was public in scope. The reason why the Catholic clergymen had not been asked to participate earlier was that much had to be played by ear, and that the only clergymen known personally to the Coordinator, and who had some knowledge of pastoral counseling, happened to be Protestant. It was also pointed out that the enthusiasm of that group now made it possible to venture further along this line.

The Catholic clergyman was interested at once, and

a letter was drawn up to be mailed to the other priests. Three meetings were held that spring at the dining hall of a local Catholic church, preceded by an excellent dinner served by the members of the parish Rosary Society. Having gained experience and confidence through his experience with Protestant ministers, the Psychiatrist found no difficulty in meeting with this group. The priests were most enthusiastic in learning more about the causes of behavior, and how to increase their skill in pastoral counseling. The books of the Project library were made available to them, and they submitted a list of books to be added.

The following year, through circumstances beyond anyone's control, no further meetings were held with them. This was not, however, due to any lack of enthusiasm by the priests. At the closing conference of the Project they were invited to participate, and five were able to do so. Several priests have since asked when they might resume meeting with Dr. Gosline, and plans are underway to schedule these meetings.

The Psychiatrist's experience with every other group was repeated here: one or more individuals approached him after the meeting to get help with a case.

CHAPTER IX

The PTAs Swell the Ranks

The over-all goal of this Project was to establish an on-going community mental health program which would include as many lay persons and groups as possible. By the spring of 1961, and for obvious reasons, the administrators concluded that the various PTAs should, if possible, now become involved in the Project, and proceeded to consider how this might be done. At this point they concluded that the most alluring prospect might be some sort of "package" deal, i.e., a number of programs on mental health would be made available to each PTA after a committee of PTA program chairmen had agreed upon the nature of the programs.

Program chairmen from seven of the nine schools met twice to consider topics and dates. There were, as was expected, a variety of suggestions for programs. Each school PTA had its own unique characteristics and had been carrying on for many years, so that the respective program chairmen had to take these matters into account. Topics were listed at random as they were brought up. Then the topics were grouped whenever possible under general headings. By noting what each topic emphasized—or seemed to emphasize; by taking into account possible implications, and then making transitions here and there, agreement was eventually reached on five programs.

Scheduling presented some problems, because several schools held their monthly PTA meetings on the same night. In short, there would be a series of five programs at seven schools, and it was understood that an effort would be made to do a "before" and "after" evaluation of the effectiveness of the series. The series was given the somewhat nebulous title "Pressures in Modern Life."

Before briefly describing each program, it should be stated that prior to each one of the seven programs which comprised the first of the series, a statement was read to the audience. This statement briefly described the Project, and informed those present that there would be a pre-post evaluation of the five PTA meetings. Questionnaires were then distributed, and each person was asked to check these without consulting anyone seated near him. The same procedure was followed at the close of the last meeting of the series. A display of appropriate pamphlets and books was set up at each meeting, and arrangements made for parents to examine and order them if they wished to do so.

The first meeting consisted of an address by the Consulting Psychiatrist, followed by discussion from the floor. One reason for doing this program was the assumption that for many persons "psychiatry" is a somewhat ominous word; and, that an effort should be made to neutralize this impression. To meet and hear a psychiatrist in the somewhat informal setting of a PTA meeting might help reduce erroneous conceptions about mental health.

The Psychiatrist spoke in non-technical terms, and made some suggestions which would contribute to emotional health which anyone could apply to daily living. The major emphasis throughout his address was on the need people have to relate to each other; to express their "feelings"; and to be able at all times to communicate with one another. He pointed out the people in almost any community who are available as listeners: clergyman, physicians, members of the family and even neighbors.

The second meeting in the series was entitled "The Adolescent: His Point of View." This consisted of a panel of four vocal high school pupils and a moderator. In this case the pupils were not selected from their own schools, except in one school where this was requested by the pupils themselves. This method of selecting pupils

was followed in order to avoid any possible embarrassment of the pupils in case there might be sticky questions from the floor. It should be noted in passing, that a panel of unhibited youngsters are frequently able to help adults understand features of the adolescent world which otherwise would be overlooked.

The panel met for a brief warming up period, but for the most part it was completely unrehearsed and spontaneous. After a short introduction by the moderator, he asked the panel such questions as "What are your major concerns?" "How do you think school might be more fruitful?" "Are there too many activities in the school day?" Some of their major concerns had to do with use of the family car; their desire to have more time for independent study at school; i.e., long-range projects which they could carry on themselves; the desire to assume more responsibility within the school. They showed little indication of what might be construed as rebellion. They were, for the most part thoughtful students, and seemed to agree that they needed authority. Perhaps a different type student might have presented a different point of view.

Some adults were impressed by the fact that these high school pupils knew practically nothing about the World War II except what they had learned second hand, i.e., through reading, TV, and moving pictures. This fact helped emphasize that the adolescent's world is, in some very important respects, quite different from that of a middle age adult.

The third meeting consisted of a one-act play of the American Theatre Wing Series, entitled "And You Never Know." This play deals with a home situation involving sibling rivalry: the jealousy of an older sister toward a younger one, (who does not appear on the stage) and dramatically points out how a mother and father may be quite blind to clues of such a condition right within their own home. The result is suffering for all concerned. Fol-

lowing the play there was always lively discussion, an outcome which this play is designed to produce.

At the fourth meeting, the School Psychologist, Paul Sohovic, who is employed by the Board of Cooperative Educational Services, showed a film entitled "Discipline During Adolescence" (Crawley: McGraw-Hill). It should be mentioned that prior to selection of this film the School Psychologist had previewed twenty-four films in order to find the film most appropriate to the kind of program which he wished to present. This film tells the story of an adolescent who keeps late hours and consequently neglects his school work. Then the viewers are presented with two ways of handling the discipline involved here: one, known as the "authoritarian" method; the other the "permissive" method.

Prior to showing the film, the Psychologist had taken the time to describe the two major points of view regarding discipline, and gave examples of each, so that the audience had some concept of what is generally meant by authoritarian discipline, and its opposite permissive discipline, before viewing the film.

The film ends in such a way that the audience is stimulated to discuss the alternative methods, suggested by the film. In other words, the film was organized so as to leave the audience in some state of suspense, hence it becomes necessary to continue the film's implications by way of discussion. All that the discussion leader needs to do is ask the question—"If you were the boy's parents what would you do?" The discussion which follows was always lively!

Parents are perplexed by teenagers; and they are much interested in knowing more about their points of view and what to do about them. These meetings, if they could be summarized, suggest that parents realize their children want controls but that many parents do not quite see how to do so. The situation is complicated for all concerned

because the adolescent is coping with the paradox of being told what to do and at the same time needs to fight for his own independence. It can be categorically stated that the kind of program described above is bound to stimulate considerable thinking by adults.

To wind up the series, the Consulting Psychiatrist moderated a panel consisting of a clergyman, a physician, a representative of industry, and an educator. The topic of these meetings was "Community Resources for Promoting Mental Health" and was followed by discussion from the floor. Since this program was unrehearsed, and there were no prepared speeches by panel members, the audience usually participated almost immediately. Following the meeting, each person was asked to check the forms used at the beginning of the first meeting, the findings of which will be discussed below.

One goal of the Project was to obtain information on the effectiveness of programs aimed at changing adults' attitudes toward mental health. Since the school was central to the Project, it was decided to use a simple standardized questionnaire which would answer the following questions: "What affect have the PTA programs had on the attitudes of the parents toward the schools?" It should be noted that the PTA programs more or less dealt with mental health, not with school programs. However, it was always assumed that the climate and program of the schools have a direct bearing on the mental health of the pupils, and that parental attitudes are important to climate and program within the school.

These are the procedures followed:

1. At the beginning of the first of the series of five meetings an instrument called "A Study of Public Opinion About the Schools"* was given to the adults. This consisted of two polls: (a) What Do

* Metropolitan School Study Council, 525 W. 120th St., New York, N. Y.

TABLE IV

Significance of the Difference of the Pre-Post Responses on the Combined Categories of Much and Very Much on "What Do You Think Schools Could Do?"

	Pre-test Percent	Post-test Percent	T Test
1. Schools could do N AL M VM to improve the physical health of youngsters	81.69	89.96	2.59*
2. Schools could do N AL M VM to improve the mental health of youngsters	85.87	92.52	2.51*
3. Schools could do N AL M VM to prepare youngsters who, as adults will be able to manage their own family business affairs	85.84	87.13	0.42
4. Schools could do N AL M VM to show youngsters how to spend leisure time happily	73.08	82.15	2.61*
5. Schools could do N AL M VM to aid students to select the vocation for which they are best suited	94.01	95.43	0.76
6. Schools could do N AL M VM to produce an American people who can "see through" propaganda and misleading information	93.04	95.02	0.87
7. Schools could do N AL M VM to produce an American people who can vote critically and intelligently	89.87	92.94	1.28
8. Schools could do N AL M VM to improve interfaith and race relations	81.03	85.05	1.28
9. Schools could do N AL M VM to reduce the automobile accident rate in America	63.07	70.53	1.90
10. Schools could do more N AL M VM to reduce juvenile delinquency	77.67	82.98	1.60
11. Schools could do N AL M VM to conserve our national resources of oil, timber, and soil	51.32	63.07	2.89*
12. Schools could do N AL M VM to achieve and maintain world peace	70.11	70.95	0.24
13. Schools could do N AL M VM to improve labor management relations	44.79	50.62	1.41
14. Schools could do N AL M VM to raise the art and music appreciation in America	82.83	84.86	0.69
15. Schools could do N AL M VM to give the American people an understanding of and respect for law	90.53	92.89	1.00
16. Schools could do N AL M VM to give youngsters an understanding of what is required of them as young people and later as adults in happy home and family living	89.19	86.24	1.09

* Those marked with asterisk are statistically significant. Item 9 was almost so.

You Think Schools Could Do? and (b) What Do Good Schools Look Like?

2. At the close of the fifth meeting these polls were readministered.

   Tables IV and V show the pre- and post-test results. Those items marked with an asterisk were significantly different. Item 9 on Table IV almost so. In computing the results on Table V, responses to "Much" and "Very Much" were combined. On Table V, response to item 6 is in the right direction, but not much change was possible. This is also true of items 2 and 3.

   On Table IV similar results occurred although the amout of change was not as great. On the pre-test the median score was 54.55, a percentile rank of 65. The median score on the post-test was 55.12, a percentile rank of 68. Thus we find the Lewis County adults felt more positive toward their schools on both the pre- and post-tests, on both Table IV and V, than the normative group.

The median score obtained on the pre-test of Table V by Lewis County respondents was 14.73. This compares with a percentile rank of 62 in the established norms. The median post-test score on Table V was 15.89, a percentile rank of 74. Thus, we find the attitudes of Lewis County parents, which were already more positive toward schools than the normative group, became even more positive.

The reader should note (1) the changes in parents' attitudes resulted from only five meetings; however, the meetings had one theme: mental health; (2) not much change was possible on a number of items because of the initial high score.

Aside from the combined scores made on these polls, by parents of seven Lewis County communities, it would be interesting to know if there were outstanding variations if scores had been tabulated for individual communities in view of the differences in community characteristics.

A close reading of all the items and percent of re-

TABLE V

Pre-Post Responses of the Community to What Do Good Schools Look Like?

Item	Pre-test Pleased Percent	Post-test Pleased Percent	Statistical Significance	Comments
1. Many classes where you can hear a pin drop.....	40.87	27.69	3.57*	Significantly less pleased
2. Students reading and discussing daily newspapers in school	93.06	93.08	1.33	Highly in favor
3. Students facing and solving real life problems in school	91.52	95.45	0.76	Highly in favor
4. Students developing their memories by memorizing poems, names of Presidents, and dates in history....	61.44	57.02	1.73	Some decrease
5. High School girls assisting teachers with kindergarten children	73.52	85.12	2.93*	Significantly more pleased
6. Students learning arithmetic entirely from a textbook without such activities as operating a school store or school bank.....	8.74	6.19	1.26	Not in favor (This is in the right direction—but not much change possible)
7. Children memorizing parts of the constitution one of the best ways of developing patriotism.....	44.79	35.95	2.51*	Significantly less pleased
8. School spending time during the regular school day on music, art clubs.....	81.75	87.60	1.56	Quite highly in favor of
9. Students working in a school garden during the school day	46.15	61.16	3.21*	Significantly more pleased
10. Most high school students taking Latin, whether they are going to college or not.....	41.65	36.78	1.30	Some decrease—mixed attitude
11. Pupils and teachers seeking and discussing all available facts on controversial issues.....	87.40	91.32	0.46	Highly in favor

12. Schools in which education is based entirely on lectures by the teachers, textbooks, homework, and recitations by the students	21.34	16.12	1.78	Some decrease negative
13. Children enjoying school very much	95.37	99.17	1.17	Highly in favor
14. Children taking trips to farms and factories during the regular school year	88.17	93.38	1.17	Highly in favor
15. Schools recognizing that reading books written by the great thinkers is the best way to learn how to think	40.10	36.78	1.29	Mixed attitude
16. Children marching between classes, supervised by teachers	25.19	22.31	1.07	Generally negative
17. Schools recognizing that book knowledge sticks better than knowledge gained in clubs, activities, and plays	26.48	21.90	1.66	Generally negative
18. Placement offices helping students to secure employment	90.75	95.87	1.54	Highly in favor
19. Schools placing a great emphasis on marks and grades	43.96	33.88	2.91*	Significantly less pleased
20. High school students getting work experience during the school day in community banks, stores, and factories	69.92	80.99	2.80*	Significantly more pleased
	N=389	N=242		

* Statistically significant at .05 level.

sponses raises some interesting questions and observations which could be discussed at great length. We shall deal with only a few.

1. Items on both Table IV and V could be construed as goals of education which in a general way have been more or less incorporated or implied in numerous statements of the goals of American education since the seven Cardinal Principles were issued in 1918; by various National Commissions; State Departments of Education; and in textbooks for teachers ad infinitum. In view of the current emphasis on "solid" subjects, the parents' responses are puzzling! Yet, repeatedly, by other means than this poll, parents have indicated that they would like schools to include learning, and serve purposes, not generally found to any extent, if at all, in most schools.
2. Although there was change in the right direction, it is interesting to note how many parents believe that Latin should be taught in high school (Item 10, Table V), even to pupils not going on to college. The prevailing expert opinion is that Latin should be taken only as a second foreign language, after a modern foreign language has been learned. Latin is rarely, if ever, required for admission to college, medical school, or nursing school.
3. Item 3—Table V—shows that ninety-five percent of the parents would like to see their children facing and solving real life problems in school. What does this mean? Is it that parents, in general, do not believe that going to school is real life for the pupils? Counting the ride on the school bus, not counting after school athletics, the pupil's working day is as long as an adult's. In addition, there may be two hours to four hours of homework each night for pupils, with assignments for week ends and vacations for good measure! The pupils probably find it pretty real! On the other hand, perhaps the parents believe that the school program as now constituted, includes many experiences, or experiences so organized, as to convince parents that much of

the school day is artificial, and even superficial. This is the judgment of many educators, both present and past. To generalize on this, some of the subject matter which boys and girls must learn, could best be learned and more effectively utilized if organized and taught around problems and questions which are meaningful to pupils because they are related to the pupils' needs and developmental tasks.

This matter does have implications for mental health! On the one hand the parents may not believe, that for many adolescents, the high school as now constituted may be a grueling experience. Any program, whether for adults or pupils, which is as regimented, monotonous, and fragmented as the typical school program has a bearing on mental health. On the other hand, if the parents would like to see different programs such as the so-called "life adjustment" program, the tide runs against them. And for many reasons. Adolescents do have concerns which are not included in the school program, and even were there a strong desire on the part of educators to include these concerns in the program, teachers would require a different kind of training than they are now receiving. Problem solving, in relation to real life situations, is an entirely different matter than problem solving in mathematics or science. The skills required for helping adolescents in these areas are subtle and difficult for many to learn. Furthermore, the present day "lock step" curriculum of the typical high school provides little opportunity for scheduling the kinds of experiences referred to as "real life problems." Even providing opportunity for pupils to take on responsibility commensurate with their maturity would require a major change of heart on the part of many who have responsibility for directing the secondary school program. It is difficult to realize that pupils in the elementary school have more freedom of movement and probably take on more responsibility, than does the typical high school senior. As the pupil grows older, regimen-

tation increases, and opportunity for self direction, as well as the assumption of responsibility, decreases.

4. Eighty-six percent of the parents would like to see the school give pupils an understanding of what is required of them as young people and later as adults in happy home and family living (Item 16, Table IV). What lies behind the parents' viewpoint we can only surmise. Are the parents uneasy about the changing nature of family life? In any case, the trend is to reduce time for homemaking. In New York State, formal courses in homemaking are not required beyond grade eight. It is not required where it could be most effective, namely, in the twelfth grade. Furthermore, very little emphasis is placed on that part of family living where the greatest number of hurdles and booby-traps are to be found, i.e., the long pull after the "romance" has worn off; the period where love, mutual respect, and understanding must be learned through experience. Undoubtedly, the cultural emphasis on "romantic" love is misleading to many, and has possible implications for mental health.
5. The most significant change was on Item I, Table V. Even so, however, over a fourth of the parents would like to see many classes where one could hear a pin drop. This is paradoxical in view of the other kinds of experiences which most of the parents want their youngsters to have. Such silence is impossible, even if desirable; and it is not. Even the sound in the school library could not be maintained at such low decible level. Jules Henry points out the positive significance of *noise* in the classroom, and that *noise* is indispensible in the learning process.[4]

One could go on at length commenting on many other items listed on Tables IV and V. The instincts of the parents are sound. The writers agree with the parents for the most part. The program and climate within the school have a bearing on mental health, perhaps a more vital bearing than we suspect. Parents seem to want their children to have

> experience other than just those which are transmitted by reading textbooks and answering questions. But the parents' responses to these polls raise many questions. For example, how much of any particular item would the parents settle for? What would happen if a particular school attempted to take any one of these items seriously and do something about it? In any case, we are left with a challenging possibility that the material in these polls, either in whole or in part, would make a sure fire starting point for some interesting and important discussion.

Apropos of discussion by youth at the PTA meetings, it seems worth reporting that in Lewis County for the last seven years, twenty talented youth from five central schools have been brought together one afternoon a week for a seminar.* Given opportunity, the pupils want to discuss some aspect of human behavior. In this connection, in the spring of 1962, and 1963, Dr. Gosline was invited to spend an afternoon with the seminar. Most of the time was spent in answering questions put to Dr. Gosline by the pupils. It is customary for the pupils to rate each meeting on a scale from one to ten so that the seminar leaders may have some feedback. At both times, when Dr. Gosline attended the seminar, the sessions were rated higher than for any other seminar since its inception in 1955.[1]

It cannot be emphasized too much, particularly since this is a report dealing with mental health, that adolescents need opportunity to gain understanding about their own emotions and feelings; to recognize that their feelings and emotions are normal; and to have this opportunity in an uncritical atmosphere—freed from the pressure

* This Seminar is unique in that it is unstructured, but develops through the year around a theme or topic, such as "The Meaning of Freedom," "The Meaning of Communication," "The Meaning of Compassion and Justice," etc.

to obtain a mark for what they do or say. Pope said "Know thou thyself, presume not God to scan; The proper study of mankind is man." For the most part adolescents study almost every conceivable thing except themselves. At the period of life when they are in greatest internal turmoil, and when they are seeking to come to terms with themselves and their bodies; and when pressures to succeed are weighing them down, more opportunity for the kind of experience described above might enhance mental health. To be sure, teachers who lead them in this kind of experience must be carefully chosen for skill, maturity, and judgment. There are some dangers involved. But the benefits which would accrue far outweigh the dangers.

CHAPTER X

As the Psychiatrist Saw It

By

ERNEST GOSLINE, M.D.

The development of a consultant type mental health program would be incomplete without a chapter by the Consultant. In serving this Project, I found the consultees always ready to listen, to discuss, and to learn. Together, we proved that a great deal can be done about the mental health of a rural community provided there is supportive local leadership, individual resourcefulness and a willingness to undertake new approaches. Methodology emphasized the use of groups, and a study of these group dynamics was an integral part of the Project. Progress occurred as a result of detailed planning and preparation. "Good intentions" alone without such planning are of limited value in such mental health programs.

New York State has assumed leadership in setting a firm governmental basis for comprehensive mental health programs through its pioneering Community Mental Health Services Act. There have been many earlier attempts at such programs; and through the industry and zeal of many dedicated persons, amazing progress has been made. These programs, however, never developed the legislative structure or teachable techniques wherewith the idealism of the "Mental Hygiene Movement" could be carried into practical and every day use.*

Training in earlier years was directed toward clinical problems as they appeared in the few existing Child Guidance and Mental Health Clinics. Despite occasional studies suggesting a greater community involvment in mental health, the actual development of services was almost ex-

* See Clifford Beers—*The History of the Mental Hygiene Movement.*

clusively focused on a sick patient. The results of these earlier movements brought State-sponsored traveling clinics to rural areas; but, these clinics although well intentioned and well-staffed, did not realistically meet community needs.

The Psychiatrist As Consultant

The psychiatrist willing to serve as Mental Health Consultant finds few guideposts in meeting this challenge. The training of psychiatrists today simply does not prepare them for the real problems facing our communities. These highly talented, but over-specialized experts faced with a consulting experience must, (1) be able to work with groups; (2) avoid the temptation to promote their own outlook to the detriment of other forms of psychiatric treatment; (3) be flexible, i.e., an open minded attitude is a major asset in any consultative experience; and (4) have a great degree of self-awareness and frankness in discussing his own experiences, personal biases, and theoretical background.

Mental health in an individual or a community does not just happen. Rather, it is the result of a multitude of cultural and social forces. The Consultant's task is to enter into the community life to a degree, and in such a manner, that a beneficial effect can take place in the total mental health of the community. This requires a flexibility of approach toward the many unsolved questions of human inter-relatedness, and an interest in the total field of human behavior.

Constant new meanings develop as one encounters a variety of individuals in groups in the operational framework of technical consultant. For example, if this consultation is to the educational system, then education itself takes on new meaning; and appears to the consultant as a daily encounter with cataclysmic social forces which deeply affect major theoretical backgrounds. Economical,

political, ethical, psychological, or other theories useful elsewhere, do not do justice to the multitude of facts and phenomena of every day community life.

In the Lewis County Project, an experienced team, under the able direction of the District Superintendent, made it possible to initiate a Mental Health Project and to sustain it through numerous crises. The careful building of community relations and the vast knowledge of persons and local personalities accumulated during the years by the Project Coordinator, Dr. Glyn Morris, made the task of the Consulting Psychiatrist immeasurably easier, and resulted in a rapid acceptance by the community of the Technical Consultant. It seemed that absolutely nothing was lost to the perceptive gaze of these persons, well versed in the scrutiny of character and readily responsive to human tragedy and comedy. I noticed that my personal idiosyncrasies of expression and habit patterns, clothing and even choice of cars, met a variety of interesting responses in the community. Although demands on the Consultant as he meets ever-emerging new tasks are great, consultation grants much satisfaction; problems are solved and goals are achieved.

The Technique of Consultation

The consultation method in this research project was distinguished from other mental health approaches from the very beginning! Psychotherapy was considered at the onset to be an untenable and impractical approach; the emphasis was to be on preventive psychiatry. The use of the special interest group, as "consultee," as for example, counselors, administrators, clergymen, and PTA groups, caused considerable variation in consultation techniques according to the needs of the situation. Consultation involves working directly with the consultee in a variety of conferences or person to person situations. In the consultation process, the consultee is led through

the consultation method to solve mental health problems within the framework of his normal professional role, i.e., the consultee is helped to meet a mental health problem in his own area of administrative responsibility. Attention is focused on the problem situation, rather than on the intra-psychic problems of the consultee. To be more specific, the counselors discussed cases which were troublesome to them. This is an educational experience for the consultee, and even though he is not expected to learn the special techniques of the psychiatrist, he is expected to be better able to cope with similar situations in the future.

Consultant activities with groups allowed for economy in the use of the Consultant's time, greater community participation, and the opportunity to reach all strata of community life.

The consultant must be sensitive to the way in which the consultee becomes involved in the Project. On the one hand, as the reader will note from previous chapters, careful attention was directed to the order and the manner in which each community group was approached, and became participants in the Project. On the other hand, consultation may begin with an approach, either directly or indirectly, on the part of a responsible consultee for help with a problem. In responding to such requests, there must be careful screening as to the reasons for the request, expectations of the consultee, and particularly, the route of the request. All requests for assistance must be met with directness, tact, equanimity, and if necessary, diplomatic but firm assertion of the "consultant" role and its limitation. Requests were made during the Project which at times circumvented the established order. In several instances, the insistence on the part of the Consultant that proper channels be utilized in the handling of an emotionally disturbed person prevented psychic damage, self-destructive acts, and possible complex legal entanglements for a number of consultees. Mistakes are possible; but

these can be minimized if there is a sincere concern for the human crisis involved. The consultation experience serves as a period of growth and self-exploration for both consultant and consultee.

Conferences were frequently held concerning specific personal situations or community attitudes. Discussion of problems centered around case material (sometimes indirectly involving the personality of the consultees) and also the use of lecture material, discussions, films, dramatization of actual situations, panels and individual consultations, with numerous key community figures. At times, personality interactions were reminiscent of the techniques available to psychotherapy. Psychotherapy, however, was ruled out in view of the limited time available to the Consultant, uncertain weather conditions, distance of travel, and the very nature of the Project as it evolved. Psychotherapy was considered to be a form of direct psychiatric help, given to emotionally disturbed persons, or groups of persons, usually over an extensive period of time. The emphasis of consultation, on the other hand, is on preventive psychiatry, and as such is often "a play it by ear" type of approach. At times, however, direct services—usually much appreciated by the community—were provided until more definitive help could be obtained. In a number of instances these consultations involved brief psychotherapy amounting to two or three sessions, or consultation with individuals involved in their own family conflicts.

The consultation process in terms of specific groups was revealing in terms of the variety of methods used and the degree of success achieved through these methods. The techniques attempted were associated with a willingness to try new approaches and an action oriented research ready to respond to the needs of the individual consultee as these appeared. A goal of the Project was the formal or informal follow-up of all such consultant activities in

order to evaluate the effectiveness of each technique utilized.

The Involvement of the Community

In a project such as this, the psychiatrist who seeks the security of the jargon of psychiatry or psychoanalysis, fails in the responsibility of communicating with interested laymen in everyday language. In community action the consultant must be a person to whom groups primarily—but individuals as well—will readily relate. Although community change requires careful planning, a constant redefinition of the role of the consultant is also necessary. During the Project, roles varied any where from friend, confidant or ally, to sports car enthusiast, story teller, or even maitre d' hotel. The growing self-awareness of participants and their interest in mental health became a new, vital, and meaningful experience only insofar as the Consultant and the Project leaders developed a warm and receptive response.

The mental health of communities can be modified and significant changes in the social structure can occur. Leaders of the community are already carrying responsibilities for mental health and acutely feel their inadequacy in meeting this demand. A program of mental health works when people are willing to discuss mutual dissatisfactions and are ready to face the necessity of change.

The involvement of community groups described in preceding chapters tells of citizens who *wanted* to change their outlook. The complete story would also tell of evenings spent away from home, of demands on the time of busy people, of self-sacrifice, of patient families, of much reading and preparation, and of the sincere soul-searching of participants in the Project. It would also include places where meetings occurred: as in schools, cafeterias, special seminar rooms, on ski slopes and in a vast array of offices, local restaurants, in homes, in cars enroute to meet-

ings, in libraries and even on the street. Discussion of cases, personal experiences, tensions, new insights, current events, the Birch Society, Existentialism, Freud and Jung, Broadway musicals, religion and psychiatry, guilt feelings, Tournier, *Lord of the Flies;* these and many more were all grist for the mental health mill and were discussed at meetings and with individuals.

The Medical Society became interested in testing procedures, and an experienced lecturer spoke on the use of drawings and art therapy. Case material was abundantly used throughout the Project to illustrate discussions. Theological questions were frequently discussed from a psychological viewpoint. The Ministers' group was most enthusiastic and interested but when this group suggested that the consultant analyze the "order of worship" discretion rather than valor led the day.

There have been previous mental health projects involving the school system and the potential of this resource in rural communities is great. In reviewing such projects, a number of pitfalls and booby-traps seemed to appear in this approach. Careful attention must be paid to channels of information which although difficult to find always exist. They must be recognized and used even if this be at the expense of missing an opportunity for some impressive but unnecessary "rescue."

The limited utilization of a psychotherapeutic approach was decided upon after much deliberation. The group dynamics experience with school guidance personnel added a new dimension to the Project but also complicated the Consultant role by veering close to psychotherapy. The group members learned group dynamics by actual participation in a group experience. At first members were most uncomfortable but as the group progressed and became cohesive, members gained greater depth of understanding and self-confidence in handling group situations appearing within the school setting.

In examining the forward progress of community groups from frustration and defensiveness, to positive action, constructive self-appraisal and planning, several principles emerged:

1. The consultant is not a volunteer and must await the request of the consultee for assistance.
2. Preliminary planning and discussion is an integral part of consultant activity.
3. Effective community action with groups or individuals depends on repeated encounters and a variety of material and presentation.
4. The consultant must respect the special needs of persons living in small communities, such as the need for anonymity and for privacy of a different kind than might be found in the urban community.
5. There was a preliminary and ongoing clarification of consultant roles prior to any action.

The program proceeded in an atmosphere of mutual and consistent support, easy accessibility and open communication. All aspects of the program were considered for follow-up and research evaluation.

Mental Health Implications of the Project

The development of mental health services in the United States today is extremely uneven. Recommended standards which are realistic for many communities, at times appear to be based more on urban than rural needs. When one considers the basic man-power shortage in the United States in mental health and the basic economic needs of the personnel involved, the recommendations of the Joint Committee on Mental Illness appear particularly unrealistic for rural areas.

The presence of the Psychiatric Consultant who has been trained in the field of general psychiatry and also in psychoanalytical theory is a new and comparably unexplored addition to the educational field. The appreciation of the individual—and of the individual in his inter-relatedness with his fellow man—is a theme which has peri-

odically recurred for thousands of years. Now we find it time to appreciate the individuality of the mentally ill, mentally retarded or emotionally disturbed person as well. As the behavioral sciences have developed, specialists who are concerned with personality growth and the development of children have become a pronounced part of the American educational scene. When a mental health point of view finds itself to be pervasive among those who play key roles at strategic times in the lives of individuals, great influence may be brought to bear on the education and personality development of children. We have shown the need of such personnel to some extent and the great possibilities of the future development of these in the Lewis County Cooperative Youth Project.

The presence of educational disabilities such as learning defects in reading, writing or mathematics, the withdrawal of children from specific school situations, hyperactivity in its many forms, school phobias, and many other children's disorders furnish objective data on which a mental health research project in the area of youth can be focused. The teacher working each day of the week in his third grade class needs a host of supportive agents. He must receive support from the entire administrative school structure, which in turn is supported through State and Federal levels. Since the teacher acts as a parental surrogate—at least in the imagination of the children — he also needs support from the parents and communication with them. He must function as the agent for the transmission of cultural standards, as well as the standards of the community. Within the framework of the classroom, he must now recognize the need for acceptance of oneself and the acceptance of children in their growth and development.

When a child arrives in school at the age of five or six he may look forward to a series of experiences, both individual and group. Through these he is asked to learn

essential knowledge and basic attitudes which are essential to survival. At some time this child will be asked to respond to stress. Gerald Caplan, from the Harvard School of Public Health, indicates that relatively short periods of crisis within individuals and groups are periods when one is struggling to cope with the dangers of frustrations. The significance of these events have lasting influence on ones future mental health. Dr. Caplan states that "during such periods there is a temporary disorganization of personality functioning and during the subsequent reorganization phase new lasting and sometimes drastically changed personality patterns are possible." The responses to this stress have therefore more enduring significance for mental health than merely immediate relief from frustration or escape from danger.

The Lewis County Project brought into practical focus many of the theoretical developments within the field of psychiatry. It is education's function to provide a sound basis for carrying the idealism of the mental hygiene movement into practical and everyday use!

We have demonstrated that even the extreme diversity and sophistication of psychoanalytic technique can be used to explain many of the phenomena that occur within the educational framework of the school and within the context of a rural community. We have demonstrated that psychiatric consultation can be successfully utilized in a rural community and that a community mental health project can be successfully organized within the framework of the school system.

CHAPTER XI

Miscellaneous But Important Notes

Insofar as this document is both a report and, hopefully, a blueprint of a kind, it seems necessary to make some final points.

First, it would be unfair to the reader to leave him with the impression that the program described in this report always rolled smoothly along. Semantic problems frequently emerged. The most obvious examples of this have been described in Chapter IV when the administrators and others met for the first time to discuss the Project. Inasmuch as mental health eludes a neat definition, it would be unusual indeed not to expect semantic difficulties when a community embarks on a program to promote mental health. The Consulting Psychiatrist, himself a professional in the field of mental health, coped with this difficulty at every step of the way. Fortunately he recognized early that there would be semantic problems, and reduced them insofar as it was possible by avoiding the use of technical terms, and by wide use of illustrations.

Inasmuch as this was a pilot project, the planners unavoidably took in more territory than was possible to handle within the time limit of the Project.

There was some unavoidable bungling of the research aspect of the Project, not by those who eventually did the research, but primarily because the Project and research were not conceived as a unit. In other words, the Project got underway before the research was designed. There was some occasional fumbling in the back field because the plays called were not clear to all concerned. We might say that while no apologies are offered for these shortcomings of the Project, these are lessons learned by experience and hindsight.

While the Project was never in serious danger, nor

were there any catastrophic situations, there was one period when it became clear that the Project leaders wished they had not taken in, or tried to take in, so much territory: a few people were suffering from the fatigue of meeting Project commitments already underway. Such a situation developed approximately two years after the Project began. Fortunately for all concerned, the Consulting Psychiatrist came to the rescue.

To be specific, this was during the series of PTA meetings described in Chapter IX, which involved considerable participation by personnel from the District Superintendent's office. At an informal meeting of the District Superintendent, the Project Coordinator, the School Psychologist and the Elementary Supervisor, the group was obviously discouraged, and members spoke frankly to this point. It was clear that the group was making heavy weather of the Project; they spoke openly of their discouragement and their personal difficulty in seeing the Project develop as planned. At this time, there was also some apprehension as to the adequacy of evaluating the Project. Consequently a meeting was arranged with the Consulting Psychiatrist.

At this meeting the Psychiatrist listened to the "moans and groans" of the Project leaders and then came to the rescue. He suggested that the situation as described be placed within a psychotherapeutic frame of reference. First of all, he pointed out the number and extent of positive actions taking place as a result of the Project. The Child Study groups were moving along smoothly; meetings of the administrators were going along smoothly, and the enthusiasm of the administrators for their meetings had not diminished; and the same could be said of meetings with the counselors, the clergy, and other small groups of teachers meeting with their principals. He further pointed out that the motivational factors were well developed; and that the District Superintendent's office

was now being viewed as a resource center for developing mental health within the community; that a good relationship had been established with the various groups involved.

He stated that the people who were responsible for much of the Project were in the same position as a therapist who has spent considerable time and effort with a patient and would like to see the patient make more rapid progress; and that this in itself develops hostility in the therapist which in turn could produce hostility in the patient. He then suggested that the group focus on the resistances in the situation; and that these resistances might be in the nature of non-essential goals of the Project, that is, aspects of the Project which were beyond reach. He made clear that if members of the group continued in their present state of mind their hostile and destructive feelings would, of course, create a reaction in the community. Further discussion helped to clarify the issues involved; sails were trimmed to meet the requirements of the situation. After this meeting, members of the District Superintendent's staff concluded that the frank discussion of their problems had been most helpful; that by looking at achievements so far accomplished, and that accepting the reality of the situation by cutting out some of the Project goals, had been good therapy for all concerned.

And now a word or two on strategy and planning. Despite some difficulty in reaching the Project goals, it is important to note that considerable planning went into the Project and that even before the Project got underway, there was consideration given to what was termed overall strategy. A five page memorandum was drawn up which included such items as the following:

> Careful consideration of what is involved in bringing about change in attitude.

The place and use of the power structure of a community.

Blocks to mental health.

Methods of communication and obstacles to communication.

Available community resources.

How best to enlist the cooperation of the school administrators.

How best to plan the strategy essential to involving the teachers.

Helping teachers grow as persons.

The nature of change and how change is brought about.

How to improve communications.

Patterns of leadership.

How to involve teachers in the process of defining problems for in-service education, etc., etc.

As the Project progressed, attention was given to various methods of bringing in other groups. Before the Protestant and Catholic clergymen were included, meetings were arranged with one member from each group so that the Project could be carefully explained to one person to get his reactions. If the group had a formal organization such as the Protestant ministers, and the Medical Association had, in this case, the chairman of each group was, of course, contacted so that protocol would not be violated.

In the case of the Medical Association, the representative appointed by the President of the Association was very careful to outline the difficulties which might be encountered in arranging a series of meetings with the county physicians. He then went on to suggest methods by which these difficulties might be avoided. In other words, wherever it seemed necessary to do so, there was preliminary discussion of the possible pitfalls, roadblocks,

booby-traps, etc., which might be encountered along the way. In one way or another the following question was asked, "What are we apt to run into in this particular aspect of the Project?"

Before the Consulting Psychiatrist met with any group he always spent time with the members of the District Superintendent's staff to discuss in detail what has been described above. Insofar as it was possible to do so, all aspects of the forthcoming "encounter" were gone over in detail.

The District Superintendent held innumerable conferences with various members of his small staff in order to discuss details of the Project and to look carefully at all the difficulties which might be met along the way. Considerable thought was given to any strain which might be placed upon the teachers involved in the Project.

In conclusion, a basic assumption of the Project leaders was that insofar as possible to do so, it would be most important to take into account the different points of view and possible problems, and to discuss these carefully, before embarking on any aspect of the Project. It was assumed and accepted that such planning would require time, and in this case, the District Superintendent provided time for such thought and discussion as was needed. When teachers were involved in an evaluation of the Project, time was provided within the school day for this.

A brief comment on the county-wide conferences which closed the third and fourth years of the Project. The first of these conferences, held in May 1962, took place in the high school of the county-seat, the Lowville Academy and Central School. In a sense this conference was held more for the benefit of the Project leaders than for the conferees. The conference reports state "A planning committee representing fifteen Lewis County community agencies, churches, Medical Association, and schools met for an all day conference—to discuss the next phase of

the Lewis County Cooperative Youth Project." The fifty persons who attended the conference were divided into five groups, and directed themselves to five questions dealing primarily with developing guidelines for such matters as, ways of providing continuous education regarding understanding of mental health; defining special groups needing counseling services; ways of utilizing more services within the community as these might be developed as a result of the Project. The groups dealt with the general question "Is it possible to develop procedures and resources within our community which can be useful before the point where highly specialized personnel must be called upon?" In a sense, the conference was planned to obtain a subjective evaluation of the Project's impact on the community-at-large.

A year later the Project closed with a conference of seventy persons primarily selected because they represented groups who had participated extensively in the Project, as well as representatives of groups which might be brought in sometime in the future. Although the conference theme was "School Children in the Achievement Squeeze," the program was planned so that the five discussion groups could make recommendations for extending the mental health program now established in Lewis County. This, on the basis that available funds make it possible to continue the services of the Consulting Psychiatrist. Interestingly enough, the main sessions of the conference were held in the newly constructed conference room of the local bank; the group sessions were held in the Baptist Church; and luncheon was served in the dining room of the Episcopal Church.

The Lewis County Cooperative Youth Project had started within the school system, so it seemed proper that the first phase should be ended by dealing with a problem which is increasingly cogent and has many implications for mental health. On the program cover was a quotation

taken from the *Saturday Review* of May 18, 1963, which served as a sort of text for the conference.

"This (pressure on children) is an extreme form of a national neurosis already infecting the American family by which the attitude of parents has been corrupted into a demand for academic achievement that sacrifices the true purposes of education in favor of an obedience to the national will."

The theme cut across all segments of the community, and the program included five questions for discussion, the fifth being perhaps the most significant: how can the community-at-large muster all its resources on behalf of children and youth, and provide the kind of inter-communication between agencies which would enable them to move in this direction?

The reports of the conference groups may be summarized as follows:

1. Children and youth of ability who live in small or rural communities are subjected to demands from many competing sources, with the problem of school bus transportation complicating the situation.
2. It was recommended that an annual conference on children and youth be held within the county. This conference should include one section consisting of adolescents.
3. There is an increasing need of counseling services for adults, and these services should be made easily available.
4. The District Superintendent of Schools for Lewis County was requested to take the initiative in setting up a council of all agencies within the community directly or indirectly concerned with children and youth.

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APPENDIX A

OUTLINE OF A THEORY OF HUMAN MOTIVATION*

(Adapted from Chapter 8, "Motivation and Personality" by A. H. Maslow, By permission of Harper & Row, Inc.)

Basic Needs:

I. The Physiological Needs:
   a. Hunger
   b. Thirst
   c. Necessary to distinguish between appetite and life and death; hunger and thirst.

II. The Safety Needs:
   a. Physical
   b. Psychological (security)
   c. Need for an orderly, predictable world.

III. The Love Needs:
   a. Affection
   b. Belongingness
   c. Affiliation
   d. Peer acceptance

IV. The Esteem Needs:
   a. Prestige
   b. Status
   c. Recognition
   d. Self-esteem more important than esteem by others.

V. The Need for Self-Actualization:
   a. Intellectual curiosity
   b. Autonomy
   c. Creative love
   d. Cognitive control.

Important Concepts:

1. Basic human needs are organized into a hierarchy of relative prepotency.
2. Prepotency concept implies that gratification of needs is *not* merely satiation, but is a means of release.
3. If a need is truly satisfied it is unimportant in the current dynamics of the individual. Only unsatisfied needs act as strong motivators of behavior.

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* As used in the administrators' meetings.

APPENDIX B

DEVELOPMENTAL TASKS AT AGE TWELVE

(Adapted from Havighurst, courtesy of David McKay, Inc.*)

1. Learning to care for and use the body in an effective manner.
2. Getting along with age-mates in a constructive pattern of social interaction.
3. Learning an appropriate masculine or feminine social role.
4. Acquiring a set of values and an ethical system as guides to behavior.
5. Achieving personal independence from parents and other adults.
6. Learning an appropriate set of social attitudes toward institutions and social groups.

The Adolescent Peer Group

1. Achieving new and more mature relations with age-mates of both sexes.
2. Achieving a masculine or feminine social role.
3. Accepting one's physique and using the body effectively.
4. Achieving emotional independence of parents and other adults.
5. Achieving assurance of economic independence.
6. Selecting and preparing for an occupation.
7. Preparing for marriage and family life.
8. Developing intellectual skills and concepts necessary for civic competence.
9. Desiring and achieving socially responsible behavior.
10. Acquiring a set of values and ethical system as a guide to behavior.

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* In "Human Development and Education," the tasks are described in detail, and suggestions are made regarding curriculum resources. The above is the outline used at the administrators' meetings.

APPENDIX C

FILMS

Title	*Producers*
Sibling Rivalries and Parents	McGraw Hill Book Co., New York, N. Y.
Sibling Relations and Personality	McGraw Hill Book Co., New York, N. Y.
Emotional Maturity	McGraw Hill Book Co., New York, N. Y.
Feelings of Hostility	McGraw Hill Book Co., New York, N. Y.
Feelings of Rejection	McGraw Hill Book Co., New York, N. Y.
Feelings of Depression	McGraw Hill Book Co., New York, N. Y.
Maintaining Classroom Discipline	McGraw Hill Book Co., New York, N. Y.
Discipline During Adolescence	McGraw Hill Book Co., New York, N. Y.
Perception	McGraw Hill Book Co., New York, N. Y.
Toward Emotional Maturity	McGraw Hill Book Co., New York, N. Y.
Meaning of Adolescence	McGraw Hill Book Co., New York, N. Y.
Meeting the Needs of Adolescents	McGraw Hill Book Co., New York, N. Y.
Over-Dependency	McGraw Hill Book Co., New York, N. Y.
Individual Differences	McGraw Hill Book Co., New York, N. Y.
Families First	New York State Youth Commission
Demonstration in Perception	U.S. Navy, Motion Picture Section, New York, N. Y.
Unconscious Motivation	Lester F. Beck, University of Oregon
Angry Boy	International Film Bureau, Chicago, Ill.
Helping Teachers to Understand Children Parts I and II	United World Films, Inc., New York, N. Y.
Near Home	British Information Services, New York, N. Y.
Preface to a Life	United States Office of Education, Washington, D. C.
Passion for Life	Brandon Films, New York, N. Y.
Shyness	National Film Board of Canada, New York, N. Y.
Over-Dependency	National Film Board of Canada, New York, N. Y.
Nature and Development of Affection	University of Wisconsin, Department of Psychology Primate Laboratory (H. F. Harlow and R. Zimmerman)

The titles of films available for programs of the kind under consideration in this report are too numerous to mention. Most of the titles may be found in the Film catalogue of the Audio-Visual Center, Indiana University, Bloomington, Indiana, or one issued by any other State university. The Psychological Cinema Register, issued by the Pennsylvania State University, University Park, Pa., deserves special mention.